



Arthroscopic SLAP Repair Protocol

0-2 weeks post op

- Arm in sling for 4 weeks
- Modalities as needed
- Pendulum exercises
 - PROM with ATC or PT; no shoulder pulleys
 - Flexion to 90°, Abduction to 90°, Internal Rotation to 30° in scapular plane,
 - External Rotation to 10°, And Extension to neutral
- Isometric strengthening and ROM of the hand, wrist, and elbow

2 weeks post op

- Avoid all active ROM exercises
- Wear sling at all times (except to shower and for pendulums), including at night
- Advance PROM to: may use shoulder pulleys if tolerated
 - Flexion to 110°, Abduction to 100°, Extension to neutral, Internal Rotation to 60° in plane of scapula, And External Rotation to 20° in plane of scapula
- Wall walks

4 weeks post op

- Wean from sling
- No IR or ER resistance exercises
- Periscapular isometrics
- PROM with shoulder pulleys
 - Flexion to 130°, Extension to 30°, Abduction to 130°, Internal Rotation to 90° in plane of scapula, And External Rotation 30° in plane of scapula
- Progress from AAROM to AROM:
 - Quality movement only, **avoid forcing** active motion with substitution patterns.
 - Remember the effects of gravity on the limb, do gravity eliminated motions first ie. Supine flexion.
- Deltoid isometrics.
- Lightly resisted **elbow** flexion

6 weeks post op

- Advance ROM to full as tolerated
- Begin standing isotonic RC exercises with arm in neutral, below 90°
- Continue periscapular isometrics
- Joint mobilization (posterior glides)





10 weeks post op

- Full A/PROM in all directions with normal ratio of movement between GH joint and SC joint
- Advance Rotator cuff strengthening to 8-10lbs on all motions
- Advance proprioception ex's as tolerated

12-24 weeks post op

- Progress strengthening program
- Overhead lifting/traction (pull-ups) as tolerated at 4 months
- Throwing activity: Start 4 months post-op. Follow functional progression per IAM protocol. Full throwing status at 6-8 months
- Contact activities: Can start at 4 months post op