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SLAP & Anterior/Posterior Labral Repair Rehab Protocol Prescription

Patient Name:	Date:	
Diagnosis: SLAP, labral tears	Frequency: 2-3 visits/week	Duration: 4 months

Week 1-2: Immediate post-operative phase

Sling immobilizer: On at all times except for showering

Exercises: AROM wrist/elbow

Scapular "pinches"

Pain free submaximal deltoid isometrics

Weeks 3-6: Phase I

Sling Immobilizer: May discontinue after 4 weeks

Exercises: Passive ER to 45 deg and extension to neutral

Passive FF in scapular plane to 140 deg

AROM wrist/elbow Scapular "pinches"

Pain free submaximal deltoid isometrics

Modalities as needed

Advancement Criteria: ER to 45 deg

FF in scapular plane to 140 deg Minimal pain and inflammation

Weeks 6-10: Phase II

Exercises: Passive & Active assisted FF in scapular plane - no limits (wand exercises, pulleys)

Passive & Active assisted ER - no limits

Manual scapular side-lying stabilization exercises

IR/ER submaximal, pain free isometrics

Modalities as needed

Advancement Criteria: FF to 160 deg

ER to 60 deg

Normal scapulohumeral rhythm Minimal pain and inflammation

Weeks 10-14: Phase III

Exercises: AAROM for full FF and ER

AAROM for IR - no limits

IR/ER/FF isotonic strengthening Scapular and latissimus strengthening Humeral head stabilization exercises

Begin biceps strengthening

Progress IR/ER to 90/90 position if required General upper extremity flexibility exercises

Advancement Criteria: Normal scapulohumeral rhythm

Full upper extremity ROM

Isokinetic IR/ER strength 85% of uninvolved side

Minimal pain and inflammation

Weeks 14-18: Phase IV

<u>Exercises</u>: Continue full upper extremity strengthening program

Continue upper extremity flexibility exercises

Activity-specific plyometrics program
Begin sport or activity related program
Address trunk and lower extremity demands

Discharge Criteria: Isokinetic IR/ER strength equal to uninvolved side

Independent HEP

Independent, pain-free sport or activity specific program

Concerns or questions:

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Physician Signature: