Lewis L. Shi, MD University of Chicago Orthopaedics, Shoulder surgery Postoperative therapy protocol

Arthroscopic Superior Labral Repair (SLAP) protocol

This protocol provides the therapists with a general guideline for patients after this type of procedure. Each patient's surgery and postoperative progress may be different, and this protocol is not intended to substitute for one's clinical decision making based on exam findings, individual progress, and/or the presence of post-operative complications. If a clinician requires assistance in the progression of a post-operative patient they should consult with the referring surgeon.

Progression to the next phase is based on Clinical Criteria and/or Time Frames as Appropriate.

Weeks 1-2

• Sling at all times except for showering, dressing, elbow/wrist exercises

Weeks 3-4

- Continued sling except for therapy
- Initiate PROM
 - o Flexion and elevation in the plane of the scapula
 - o External rotation(ER)/internal rotation (IR) with arm in scapular plane
 - \circ ER to 10° - 15°
 - \circ IR to 45°
- No AROM ER, extension, or abduction
- Submaximal isometrics for all rotator cuff, periscapular, and shoulder musculature
- No isolated biceps contractions (i. e. no active elbow flexion)
- Cryotherapy, modalities as indicated

Week 5-6

- Discontinue use of sling at end of week 4
- Continue gentle PROM exercises (Rate of progression based on patient's tolerance)
- Begin AROM of shoulder (all planes, gravity eliminated positions then gravity resisted position once adequate mechanics)
- May initiate gentle stretching exercises
- Gentle Proprioceptive Neuromuscular Facilitation (PNF) manual resistance
- Initiate prone exercise program for periscapular musculature
- Begin AROM elbow flexion and extension; NO biceps strengthening
- Initiate rhythmic stabilization drills within above ROM
- Initiate proprioceptive training within above ROM
- Continue use of cryotherapy, modalities as indicated

Weeks 7-9

- Gradually progress P/AROM
- Begin isotonic rotator cuff, periscapular, and shoulder strengthening program
- Continue PNF strengthening
- begin sub maximal pain free biceps isometrics

Weeks 10-12

- Progress ER P/AROM to thrower's motion
- Progress shoulder isotonic strengthening exercises as above
- Continue all stretching exercises as need to maintain ROM.

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- Progress ROM to functional demands (i.e., overhead athlete)
- begin gentle resisted biceps isotonic strengthening @ week 12

Weeks 13-16

- Continue all stretching exercises (capsular stretches)
- Maintain thrower's motion (especially ER)
- Continue rotator cuff, periscapular, and shoulder strengthening exercises
- progress isotonic biceps strengthening as appropriate
- PNF manual resistance
- Endurance training
- Initiate light plyometric program
- Restricted sports activities (light swimming, half golf swings)

Weeks 17-20

- Initiate interval sport program (e.g. throwing)
- Continue flexibility exercises
- Continue isotonic strengthening program
- PNF manual resistance patterns
- Plyometric strengthening