



## **SLAP Repair Rehabilitation: Post-Operative Instructions**

**Phase 1:** Immediate postoperative period (weeks 0-6)

### **Goals**

- Maintain / protect the integrity of repair
- Gradually increase PROM
- Diminish pain and inflammation
- Prevent muscular inhibition
- Become independent with modified ADLs

### **Precautions**

- Maintain arm in KnappSak2, remove only for exercise
- No shoulder AROM, lifting of objects, shoulder motion behind the back, excessive stretching or sudden movements, supporting of any weight, lifting a body weight by hands
- Keep incision clean and dry

### **Criteria for Progression to Phase 2**

- Passive forward flexion to  $> 90^\circ$
- Passive ER to  $10^\circ$
- Passive IR to  $45^\circ$
- Passive abduction  $> 90^\circ$  in the scapular plane

### **Days 1 to 6**

- KnappSak2
- Pendulum exercises
- Finger, wrist, and elbow AROM without weights
- Begin scapula musculature isometrics / sets; cervical ROM
- Cryotherapy for pain and inflammation

### **Days 3 to 6**

- Begin pulley exercises in forward flexion and abduction  $< 90^\circ$
- Maintain proper posture, joint protection, positioning and hygiene

### **Days 7 to 28**

- Continue with KnappSak2 at night and day for comfort

Pendulum / pulley exercises

Begin PROM to tolerance (done supine; should be pain free)

Flexion to 90°

ER in scapular plane to 25-30°

IR in scapular plane to 55-60°

Continue elbow, wrist, and finger AROM / resisted

Submaximal isometrics for all cuff, periscapular, and shoulder musculature

Cryotherapy is needed for pain control and inflammation

May resume general conditioning program (e.g., walking, stationary bike) Aquatherapy / pool therapy may begin three weeks postoperative

## **Phase 2: Protection and active motion (weeks 6-12)**

### **Goals**

Allow healing of soft tissue

Do not overstress healing tissue

Gradually restore full PROM (weeks 4-5)

Decrease pain and inflammation

### **Precautions**

No lifting

No supporting body weight with hands and arms

No sudden jerking motions

Avoid upper extremity bike and ergometer

### **Criteria for progression to Phase 3**

Full AROM

### **Weeks 5-6**

Discontinue KnappSak2 at night

Between weeks 4-6, use KnappSak2 for comfort only

Discontinue KnappSak2 at end of week 6

Gradually improve PROM and AROM

Flexion and elevation in the plane of the scapula to 145°

Abduction to 145°

External rotation 45-50° at 45° abduction

Internal rotation 55-60° at 45° abduction

Extension to tolerance

Continue cryotherapy as needed

May use heat before ROM exercises

Aquatherapy OK for light AROM exercises

Ice after exercise

### **Weeks 6-8**

Continue AROM, AAROM, and stretching exercises

Begin rotator cuff isometrics – No empty can in forward plane  
Continue periscapular exercises

Gradually progress PROM and AROM

Flexion, elevation in the plane of the scapula, and abduction to 180°

External rotation 90-95° at 90° abduction

Internal rotation 70-75° at 90° abduction

Extension to tolerance

AAROM = active assisted range of motion

ADL = activity of daily living

AROM = active range of motion

ER = external rotation

IR = internal rotation

PROM = passive range of motion

ROM = range of motion

### **Phase 3: Early strengthening (weeks 10-16)**

#### **Goals**

Full AROM (weeks 10-16)

Maintain full PROM

Dynamic shoulder stability

Gradual restoration of shoulder strength, power, and endurance

Optimize neuromuscular control

Gradual return to functional activities

#### **Precautions**

No lifting objects >5 pounds, sudden lifting or pushing activities, sudden jerking motions, overhead lifting

Avoid upper extremity bike and ergometer

#### **Criteria for progression to Phase 4**

Ability to tolerate progression to the low level functional activities

Demonstrated return of strength / dynamic shoulder stability

Reestablishment of dynamic shoulder stability

Demonstrated adequate strength and dynamic stability for progression to more demanding work- and sport-specific activities

#### **Week 10**

Continue stretching and PROM, as needed

Dynamic stabilization exercises

Progress ER PROM and AROM to thrower's motion

ER 110-115 at 90° abduction in throwers (weeks 10-12)

Progress shoulder isotonic strengthening exercises as above  
Continue all stretching exercises as need to maintain ROM.  
Progress ROM to functional demands (i.e., overhead athlete)

**Week 12**

Begin gentle resisted biceps isotonic strengthening @ week 12

**Week 14**

Continue all exercises listed above  
Progress to fundamentals shoulder exercises

**Phase 4: Advanced strengthening (weeks 16-22)**

**Goals**

Maintain full non-painful AROM  
Advance conditioning exercises for enhanced functional use  
Improve muscular strength, power and endurance  
Gradual return to full activities

**Week 16**

Continue ROM and self-capsular stretching for ROM maintenance  
Continue progression of strengthening  
Advance proprioceptive, neuromuscular activities  
Light sports (golf chipping / wedges, tennis ground strokes) if doing well

**Week 20**

Continue strengthening and stretching  
Continue stretching if motion is tight  
Initiate interval sports program (e.g., golf, doubles tennis) if appropriate