

## **SLAP Repair Protocol**

There are no specific time guidelines to progress the patient through each phase. However, it is important to review the Phase duration guidelines proposed and not progress the patient too quickly. The therapist must take into consideration the individual patient's healing rate, extent of surgery, and subjective and objective findings before advancing to the next phase.

For Throwing Athletes: Throwing should only begin when full pain free ROM and full strength is achieved.

### **Phase I: (0-4 weeks)**

#### Goals:

- Protect surgery
- Decrease pain and inflammation
- Home Exercise Program
- Patient education

#### Plan:

- Sling: 0-4 weeks (usually 4 weeks – check with physician)
- Pendulum/cane – begin at 3 weeks
- Pulley – begin at 3 weeks
- Cervical spine stretches
- Scapular mobilization and strengthening – as soon as possible
- PROM – begin at 3-4 weeks
  - \*\*\*\*To protect labrum: avoid adduction/external rotation at extreme end-range\*\*\*\*
- Aquatic therapy
- Isometrics
- Modalities as needed: ice; electrical stimulation
- \*\*\*\*Avoid heavy bicep work\*\*\*\*

### **Phase II (about 4-6 weeks)**

#### Goals:

- Control pain and inflammation
- Improve functional ROM
- Increase strength
- Home Exercise Program

#### Plan:

- Modalities PRN
- Continued scapular and glenohumeral joint mobilization

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## **SLAP Repair Protocol**

- Advance scapular and rotator cuff strengthening with light therabands and PREs
- UBE
- Advance pool exercises

### **Phase III (6+ weeks)**

#### Goals:

- Functional ROM
- Normalize strength/power
- Return to activities (work, sports)
  - Light sports at 3-4 months
  - Heavy throwing at 4-6 months

#### Plan:

- Advance strengthening program: weight training
- Improve coordination: i.e. diagonal lifting, plyoball
- Sports Specific Training
- Home Exercise Program