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Superior Labrum Anterior and Posterior (SLAP) Repair Protocol

Name:	Date:
Diagnosis:	
Date of Surgery:	
Frequency:	times per week Duration:weeks
Weeks 0-1:	
	o home exercises given to the post-op (pendulums, elbow ROM, wrist ROM, grip
strengtheni	
Weeks 1-4:	
No IR up the	e back; No ER behind the head
 ROM goals: 	90° FF/20° ER at side
 No resisted 	FF or biceps until 6 weeks post-op as to not stress the biceps root
 Sling for 4 w 	/eeks
	/ice after PT sessions
Weeks 4-8:	
 D/C sling 	
	OM 140° FF/ 40° ER at side/ 60° ABD/ IR behind back to waist
-	ng (isometrics/light bands) within AROM limitations
	rengthening scapular stabilizers (traps/rhomboids/lev. scap/etc)
•	dalities per PT discretion
• If ROM lack	ing increase to full with gentle passive stratching at and ranges
	ing, increase to full with gentle passive stretching at end ranges engthening as tolerated: isometrics \rightarrow bands \rightarrow light weights (1-5 lbs); 8-12 reps/2-3
	tor cuff, deltoid, and scapular stabilizers
Months 3-12:	
	engthening 3x/week to avoid rotator cuff tendonitis
 Begin UE er 	
•	trically resisted motions, plyometrics (ex weighted ball toss), proprioception (ex body
-	closed chain exercises at 12 weeks.

- Begin sports related rehab at 3 months, including advanced conditioning
- Return to throwing at 4 ½ months
- Throw from pitcher's mound at 6 months
- MMI is usually at 12 months

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Comments:

Additional:
Functional Capacity EvaluationWork Hardening/Work Conditioning Teach HEP
Modalities:
Electric StimulationUltrasoundIontophoresisPhonophoresisTENSHeat before/after
Ice before/afterTrigger points massageOther:
Therapist's discretion
Signature: Date: