SLAP REPAIR PROTOCOL

Day 1-6 Post-op

- **Immobilation:** Sling continuously worn with abduction pillow for 6 weeks. May remove sling for hygiene and exercise.
- PT removes bandages on POD #3, keep steri-strips intact until Dr Babb can remove them.
- No ointments, betadine etc should be used on the incisions or portals.
- If any drainage/oozing is present recover with 4x4’s, and notify Dr Babb (may need antibiotics).
- **NO ice bags** on any oozing or open wounds without being covered first with a bandage.
- If any wounds are oozing delay range of motion until wounds are closed and healed.
- **NO water on wounds** for 2 weeks (including showers) even if covered, no submersion of wounds in water (baths) until wounds are scars.
- **PRECAUTIONS: NO ACTIVE BICEPS CONTRACTION FOR 6 WEEKS WITH SLAP TYPES II AND IV**

  - **PROM:**
    - Flexion/scaption to 60
    - ER in neutral to 15
    - IR in neutral to 45
  - **Exercise:**
    - PROM elbow full
    - AROM wrist & hand full

Day 7-13 Post-op

- **PRECAUTIONS: NO ACTIVE BICEPS CONTRACTION**
- **Sling:** Continue as above
- **PROM:**
  - Flexion/scaption to 75
  - Continue other motions as above

Day 14-27 Post-op

- **PRECAUTIONS: NO ACTIVE BICEPS CONTRACTION**
• **Sling:** continue as above  
• **PROM:**  
  o Flexion/scaption to 90  
  o ABD to 85  
  o ER at 35 degrees ABD: 30 degrees  
  o IR at 35 degrees ABD: 60 degrees  
• **Exercise:**  
  o Begin submaximal isometrics  
  o Begin rhythmic stabilization  
  o Continue as above  

**Day 28-34 Post-op**

• **PRECAUTIONS:** NO ACTIVE BICEPS CONTRACTION  
• **Sling:** Continue as above  
• **PROM/AAROM:**  
  o Flexion/scaption to 145  
  o ER at 45 degrees ABD: 50 degrees  
  o IR at 45 degrees ABD: 60 degrees  
• **Exercise:**  
  o Continue as above  
  o Begin gentle AAROM per ROM limitations above  
  o Begin light IR/ER tubing (arm at side)  
  o **No resisted shoulder elevations**

**Day 35-41 Post-op**

• **PRECAUTIONS:** NO ACTIVE BICEPS CONTRACTION  
• **Sling:** Continue as above  
• **PROM/AAROM:**  
  o Flexion, ABD, & IR progress to full  
  o ER 0-90 at 90 degrees  
• **Exercise:**  
  o Continue as above  
  o Begin prone rowing & prone horizontal ABD

**6-9 Weeks Post-op**

• **Sling:** DC sling  
• **ROM:**  
  o Continue progressing flexion, ABD, & IR to full  
  o ER 0-90 at 90 degrees  
• **Exercise:**  
  o Begin progressive biceps activation and strengthening  
  o Progress PRE to maximize RTC and scap strength  
  o Total arm strengthening
o Proprioceptive training
  o Thrower’s Ten

10-12 Weeks Post-op

- ROM:
  - Full
  - Progress ER at 90 deg ABD to thrower's motion (100-115 degrees)
- Exercise:
  - Progress PRE to maximize RTC and scap strength
  - Total arm strengthening
  - Proprioceptive training
  - Progress Thrower's Ten

3-4 Months Post-op

- Maintain ROM/flexibility
- Exercise:
  - Continue to progress strengthening
  - Begin light plyometrics
  - Restricted activities (light swimming, half golf swings)

4-5 Months Post-op

- Maintain ROM/flexibility
- Continue to progress strengthening
- Begin interval sports/throwing program

5-6 Months Post-op

- Maintain ROM/flexibility
- Continue to progress strengthening
- Progress interval sports/throwing program

6-9 Months Post-op

- Gradual return to sports

Patient progression during the time frames along with general modality and exercise choice is left up to the discretion of the treating therapist. If you have any questions regarding this protocol, please contact (316) 440-1100.