



Postoperative Rehabilitation Protocol for Anterior Labral Repair / SLAP Repair

*Patient will wear an abduction pillow sling for 6 weeks postoperatively

*Unless otherwise specified, do not begin PT until patient has been seen for 2-week postoperative visit

Phase 1: Maximal Protection Phase (0-4 weeks)

- Sling worn for 6 weeks (except during physical therapy / hygiene)
- Protect anterior/posterior capsule from stretch.
- Begin passive ROM only at 2 weeks
- Supine forward elevation in scapular plane to 90°; External rotation with arm at side to 30°; Internal rotation to 45°
- Hand gripping exercises, Elbow/Wrist/Hand ROM
- Begin Deltoid/Cuff Isometrics
- Codmans exercises
- Modalities PRN

Phase 2: Moderate Protection Phase (4-8 weeks)

- Continue shoulder, elbow, and hand ROM
- Progress PROM
 - Advance IR to 60°
 - o ER to 50°
 - o Flexion & Scaption to 145° (can progress further if tolerated)
- Initiate scapulothoracic isometrics and proprioceptive training (rhythmic stabilization drills)
- Gentle submaximal shoulder isometrics
- Initiate limited AROM/AAROM of shoulder to 90° flexion or abduction
- Can begin active supination (no resistance / elbow flexed)
 - No biceps loaded until week 10
- Continue modalities PRN
- Full ROM should be achieved at 8-10 weeks

Phase 3: Continued Protection Phase (8-12 weeks)

- Continue to progress AROM/PROM (Full by week 10)
 - o Flexion and scaption to 180°
 - o ER at 90° abduction to 90°
 - IR at 90° abduction to 70°
- Initiate ER in 45° abduction at 10-12 weeks
- Full AROM in all directions below horizontal with light resistance
- Progress to Deltoid/Cuff Isotonics and may begin more aggressive exercises for rotator cuff and scapulothoracic musculature
- All strengthening must be below the horizontal
- NO biceps loading until week 10

Phase 4: Minimal Protection/Strengthening Phase (12-20 weeks)

Goals

- Full non painful AROM/PROM
- Restoration of muscle strength, power and endurance
- No pain or tenderness
- Gradual initiation of functional activities

Exercises

- Continue isotonic progressive resistive exercises and manually resisted exercises
- Progress ER motion to 90/90 position
- Begin submaximal exercises above 90° of elevation
- Isotonic elbow flexion and forearm supination
- Can increase intensity and decrease reps
- Initiate light plyometric activities (2-handed progression to single-handed) and gradually progress
- Aggressive scapular stabilization and eccentric strengthening program
- Restore scapulohumeral rhythm
- **No overhead sports until week 20

Phase 5: Return to Sport phase (20+ weeks)

- Progress functional activities
- Begin interval sports programs
- May begin throwing from mound weeks 24-28