**Dr. Stephen R. Shively DO** Department of Orthopedic Surgery – Sports Medicine Hancock Regional Hospital

Hancock Regional Hospital www.SteveShivelyDO.com (317) 477-6683



## Physical Therapy Prescription – SLAP Repair

MOON (Multicenter Orthopaedic Outcomes Network) Protocol

Name:	Date:
Diagnosis: R / L arthroscopic SLAP repair	Date of Surgery:

Frequency: 2-3 times per week for 6 weeks, beginning 1 week after surgery

## Phase I (Weeks 0 - 6):

- Sling with abduction pillow or Shoulder Immobilizer: Continue for a total of 6 weeks
- Range of Motion:
  - Weeks 1-2: PROM, AAROM including FF to 60°, ER to neutral with arm at side, IR to 45° **NO active ER**, extension, or abduction
  - Weeks 3-4: PROM, AAROM including FF to 90°, ABD to 85°, ER at 30° of ABD to 30°, IR at 30° of ABD to 60°
    - NO active ER or extension
  - Weeks 5-6: PROM, AAROM including FF to 145°, ER at 45° of ABD to 50°, IR at 45° of ABD to 60°
  - Week 6: initiate gentle ROM at 90° of abduction, progress to 30° of ER
- Exercises: begin gentle isometrics at week 2; but no ER/IR
  - Weeks 3-4: begin scapular stabilizers (protraction, retraction) with arm in sling
  - Weeks 5-6: initiate active shoulder ABD (without resistance), "full can" exercises, prone rowing, prone horizontal abduction
  - Week 6: start biceps isotonics
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

## Phase II (Weeks 7 – 14):

- Range of Motion: increase as tolerated, goal is full ROM by week 10, full AROM by week 12
- Exercises: continue Phase I; progress isotonic strengthening program, PNF strengthening, stretching
  - Weeks 7-9: Initiate Throwers Ten Program
- Modalities: Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

## Phase III (Weeks 15 - 20):

• Exercises: continue Phase II, advance as tolerated

Date \_\_\_\_\_

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- Weeks 14-16: initiate light plyometric program, restricted sports activities including light swimming and half-golf swings
- Week 16: initiate interval sport program (ie, throwing)
- Okay to return to contact sports or heavy labor at 20 weeks if patient has full non-painful ROM, satisfactory static stability,