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ORTHOPAEDIC SURGERY
FRACTURES
JOINT REPLACEMENT
SPORTS MEDICINE

ARTHROSCOPIC REPAIR OF SLAP LESIONS

Weeks 1-2

- Wear sling during the day for 3-4 weeks
- Sleep in your sling for 3-4 weeks
- Monitor neurovascular status
- Allow elbow to fully extend 3-4 times a day, but avoid biceps contraction.
- Avoid any compression, traction, or shearing on the labrum
- Check for correct placement in sling, allowing no extension beyond neutral
- Supine passive range of motion:
 - Flexion to 75-90°
 - ER to 20-30° with elbow supported on towel roll for scapular plane
 - IR to 35° in scapular plane
 - Abduction 30°
- Exercises
 - Submaximal limited range scapular exercise
 - Submaximal shoulder isometrics (ER/IR/Flexion/Abduction in neutral)
 - Wrist and hand exercises
- Ice and modalities as needed for pain and swelling

Weeks 3-4

- Progress supine passive range of motion
 - Flexion to 90-120°
 - ER to 60°
 - IR to 55°
- Advance with scapular exercise, no resistance except for light isometrics
- Continue shoulder isometrics; add extension but must be at 15-20°
- Avoid extension beyond neutral
- Light rhythmic stabilization in neutral to 20° with towel roll
- Pulley when supine flexion reaches 120°
- Monitor swelling, abnormal pain response, and increased night pain and modify accordingly
- Ice and modalities as needed for pain and swelling

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Weeks 5-6

- Progress supine passive range of motion
 - Flexion to 145°
 - ER to 70-80° with shoulder abducted 60-90°
 - IR to 65° with shoulder abducted 45-60°
- Progress scapular exercise to dynamic short range manuals
- Begin light resistance exercise with theraband for ER, IR, and rows (avoid extension beyond neutral)
- Begin active flexion and scaption to 90°
- Begin UBE
- Watch scapulo-humeral rhythm, emphasize concentric and eccentric
- Emphasize scapular stabilization
- May utilize posterior capsular mobilization and/or gentle horizontal adduction stretch with shoulder in 45-80° flexion; 20-30 seconds 2-3 repetitions
- Ice and modalities as needed for pain

Weeks 7-8

- Progress manual scapular exercises
- Progress strengthening exercises with theraband and light weights – focus on higher reps and lower resistance
- If adequate range of motion is achieved, may begin prone core scapular stabilization and cuff program. If adequate range is not yet achieved or patient is not comfortable with prone program, initiate with supine theraband program and advance as tolerated
- Begin light biceps resistance as tolerated, hammer curls
- Progress range of motion toward normal in all planes, including ER at 90° abduction
- Multi-angle rhythmic stabilization

Weeks 9-12

- Continue stretching and strengthening program
- Begin PNF patterns: limited range → full range, proximal → middle → distal resistance
- Begin matrix program for 3-D training and no weight first week, then progress to light weight
- CKC on wall or slideboard