



**DR. CARL DIRAIMONDO**  
**SLAP REPAIR POST-OP THERAPY PROTOCOL**

**Phase 1 – Protection Phase (0-6 weeks)**

<b>Goals for Phase 1</b>	<b>Precautions for Phase 1</b>
<ul style="list-style-type: none"><li>• Protect surgical shoulder</li><li>• Pain control</li><li>• Edema management</li><li>• Prevent shoulder hypomobility – focus on posterior shoulder flexibility and minimizing IR and horizontal adduction loss</li></ul>	<ul style="list-style-type: none"><li>• Sling immobilization for 6 weeks</li><li>• No shoulder AROM</li><li>• No isolated biceps contraction</li><li>• No passive or forceful movements into shoulder ER, extension and horizontal abduction</li></ul>

**Shoulder PROM**

- Scaption:
  - **0-4 Weeks:** 90 degrees (short lever to reduce tension on long biceps head)
  - **4-6 Weeks:** 140 degrees
- ER:
  - **0-4 Weeks:** 0 degrees, arm at side
  - **4-6 Weeks:** 50 degrees, arm at side OR in slight abduction (for overhead throwers only)
- IR:
  - **0-4 Weeks:** 35 degrees, arm at side
  - **4-6 Weeks:** 60 degrees at 45 degrees abduction

**Exercises**

- Arm hangs
- Wrist and hand AROM
  - Gripping exercises (ball, sponge)
- Elbow/forearm PROM
  - Progressing to AAROM at 4 weeks if biceps tenodesis was done
- Cervical and thoracic spine mobility exercises/stretches
- Scapular retraction/clocks
- Gentle, scar tissue mobilization
- Desensitization of the axillary nerve distribution as needed

**Modalities**

- Cryotherapy, e-stim as needed



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**Phase 2 – Restoring Motion (6-8 weeks)**

<b>Goals for Phase 2</b>	<b>Precautions for Phase 2</b>
<ul style="list-style-type: none"><li>• Discontinue use/wean from immobilization sling</li><li>• Pain management edema control</li><li>• Obtain full PROM of shoulder, initiate AAROM</li><li>• Initiate scapular stabilization exercises</li><li>• Initiate light biceps activation A/AAROM</li></ul>	<ul style="list-style-type: none"><li>• Avoid forceful progression of motion</li><li>• Avoid any aggravating activity</li><li>• Avoid resisted bicep activity to protect healing of the biceps anchor until status post 12 weeks</li></ul>

**Continue PROM → AROM**

- Scaption:
  - **6-8 Weeks:** 160 degrees
- ER:
  - Gradually increase by up to 10 degrees per week
  - 80 degrees with arm at side, then slowly working into 90 degrees abduction
- IR:
  - 80 degrees at 45 degrees abduction, gradually progressing to 90 degrees abduction to prevent posterior capsule tightness (go slow and avoid aggressive end ROM in abduction)

**AAROM Exercises**

- Pulleys, table slides, wall climbs, dowel exercises
- Arm bike
- Joint mobilizations
- Posterior capsule, scapular, SC/AC joints, cervical/thoracic spine
- Scar tissue mobilization
- Shoulder submaximal isometrics
  - IR/ER/abduction
- Initiation of proprioceptive/rhythmic stabilization exercises
- Core strengthening
- Cardiovascular component
  - biking, walking

**Modalities**

- Cryotherapy, e-stim as needed



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**Phase 3 – Active Range of Motion (8-12 weeks)**

<b>Goals for Phase 3</b>	<b>Precautions for Phase 3</b>
<ul style="list-style-type: none"><li>• Obtain full AROM without compensation</li></ul>	<ul style="list-style-type: none"><li>• Avoid resisted bicep activity to protect healing of the biceps anchor until status post 12 weeks</li><li>• Avoid IR stretching with combined extension as this increases the strain to anterior capsule</li></ul>

**Shoulder AROM**

- Supine, side lying, prone, reclined, seated, etc. to reduce strain on biceps
- Scaption and abduction 180 degrees
- ER 90 degrees at 90 degrees abduction
- IR 80 degrees at 90 degrees abduction

**10 Weeks – May Initiate Submaximal Elbow Flexion/Extensions**

- Arm bike
- Shoulder circles/ABCs
- Gentle posterior capsule stretching
  - Sleeper stretch, across chest horizontal adduction stretch
- Joint mobilizations
  - Posterior capsule, scapulothoracic, SC/AC joints, cervical/thoracic spine
- Scapular stabilization exercises
- Rotator cuff strengthening in neutral (i.e. side lying ER, IR/ER TheraBand)
- Periscapular strengthening
- Serratus press
- Prone shoulder exercises
  - Extension to neutral, rows, horizontal abduction
- Standing TheraBand shoulder extension, rows
- Core strengthening
- Cardiovascular component
  - Biking, walking



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**Phase 4 – Strengthening (12-16 weeks)**

<b>Goals for Phase 4</b>	<b>Precautions for Phase 4</b>
<ul style="list-style-type: none"><li>• Full shoulder AROM without compensation</li><li>• Strength 5/5 for all motions</li></ul>	<ul style="list-style-type: none"><li>• No swimming, throwing, or overhead sports</li><li>• Keep activity at non-provocative intensities</li></ul>

**Strengthening**

- May initiate elbow flexion/extension strengthening
- Begin strengthening IR/ER through motion up to 90 degrees abduction
- Progress from cardinal plane strengthening into multidirectional strengthening
  - PNF
- Initiate closed-chained strengthening exercises:
  - UE weight bearing through raised mat table
  - Incline against wall
  - Progress to lower incline until quadruped on floor
  - Quadruped to plank position on floor, progress double arm to single arm
- Continue neurodynamic/plyometric strengthening; emphasize eccentric strengthening
- Core strengthening
- Cardiovascular component:
  - Biking
  - Walking
  - Elliptical
  - Running



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**Phase 5 – Advanced Strengthening (16+ weeks)**

<b>Goals for Phase 5</b>	<b>Precautions for Phase 5</b>
<ul style="list-style-type: none"><li>• Full shoulder ROM</li><li>• Shoulder strength 5/5 for all motions</li><li>• Transition to work conditioning as appropriate</li><li>• Initiate sports type motions/intensities/ velocities</li></ul>	<ul style="list-style-type: none"><li>• Keep activity at non-provocative intensities</li></ul>

**Return-to-Sport Activities**

- May initiate return to throwing protocol and sport-specific activities
- Increase intensity, velocity, and power to meet patient's goals

**Criteria to Return-to-Sport**

- Isokinetic ER/IR < 10% deficit (compared to unaffected side)
- No or minimal compensatory shoulder elevation (shrugging) with active movement
- 0/10 pain
- 60-second plank on hands without scapular winging
- UE Y balance test 80% limb length for all three reaches (cross body, scaption, extension)
- Throwing athletes (refer to Thrower's Program)



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**Phase 6 – Return-to-Activity/Sport (6-9 months)**

- Gradually progress to unrestricted participation in contact sports
- Continue stretching/strengthening