

and closed chain exercises at 12 weeks.

SLAP REPAIR PHYSICAL THERAPY PROTOCOL/PRESCRIPTION

| N | lame: |
|---|---|
| | Diagnosis: Date of Surgery : |
| | Weeks 0-1: - Patient to do Home Exercises given to the post-op (pendulums, elbow ROM, wrist ROM, grip strengthening |
| | Weeks 1-4: - No IR up the back; No ER behind the head - ROM goals: 90° FF/20° ER at side - No resisted FF or biceps until 6 weeks post-op as to not stress the biceps root - Sling for 4 weeks - Heat before/ice after PT sessions |
| | Weeks 4-8: - D/C sling - Increase AROM 140° FF/ 40° ER at side/ 60° ABD/ IR behind back to waist - Strengthening (isometrics/light bands) within AROM limitations - Also start strengthening scapular stabilizers (traps/rhomboids/lev. scap/etc.) - Physical modalities per PT discretion |
| | Weeks 8-12: - If ROM lacking, increase to full with gentle passive stretching at end ranges - Advance strengthening as tolerated: isometricsàbandsàlight weights (1-5 lbs); 8-12 reps/2-3 set per rotator cuff, deltoid, and scapular stabilizers |
| | Months 3-12: - Only do strengthening 3x/week to avoid rotator cuff tendonitis - Begin UE ergometer - Begin eccentrically resisted motions, plyometrics (ex weighted ball toss), proprioception (ex body blade), |



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Date: _____

| Frequency: times per week | Duration: | weeks |
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| Comments: | | |
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| - MMI is usually at 12 months | | |
| Return to throwing at 4 monthsThrow from pitcher's mound at 6 months | | |
| - Begin sports related rehab at 3 months, including advanced condit | ioning | |
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