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## **SLAP REPAIR PRESCRIPTION**

NameDateDiagnosis
Date of Surgery
Frequency: 1 2 3 4 times/week Duration: 1 2 3 4 5 6 Weeks
Weeks 1-4:`
• No IR up the back; No ER behind the head
<ul> <li>ROM goals: 90° FF/20° ER at side</li> <li>No resisted FF or biceps until 6 weeks post-op as to not stress the biceps root</li> </ul>
• Sling for 4 weeks
Heat before/ice after PT sessions
Weeks 4-8:
<ul> <li>D/C sling</li> <li>Increase AROM 140° FF/ 40° ER at side/ 60° ABD/ IR behind back to waist</li> </ul>
<ul> <li>Increase AROM 140° FF/ 40° ER at side/ 60° ABD/ IR behind back to waist</li> <li>Strengthening (isometrics/light bands) within AROM limitations</li> </ul>
• 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
<ul> <li>Advance strengthening as tolerated: isometrics → bands → light weights (1-5 lbs); 8-12 reps/2-3 set per rotator cuff, deltoid, and scapular stabilizers</li> </ul>
Months 3-12:
• Only do strengthening 3x/week to avoid rotator cuff tendonitis
<ul> <li>Begin UE ergometer</li> <li>Begin eccentrically resisted motions, plyometrics (ex weighted ball toss), proprioception (ex body blade</li> </ul>
and closed chain exercises at 12 weeks.
Begin sports related rehab at 3 months, including advanced conditioning
<ul> <li>Return to throwing at 4 ½ months</li> <li>Throw from pitcher's mound at 6 months</li> </ul>
<ul> <li>MMI is usually at 12 months</li> </ul>
Comments:
Functional Capacity EvaluationWork Hardening/Work ConditioningTeach HEP
Modalities Electric StimulationUltrasound IontophoresisPhonophoresis Heat before/afterIce before/after
Trigger points massageTENSOther The second defTree version
Signature Date