



## SCHOOL OF MEDICINE

DEPARTMENT OF  
ORTHOPAEDICS & REHABILITATION

**Gehron Treme MD, Andrew Veitch MD, Dustin Richter MD,**

**Daniel Wascher MD, Robert Schenck MD**

UNM SPORTS MEDICINE

1213 University Blvd NE, MSC10 5600, 1 University of New Mexico; Albuquerque, NM 87131-0001

Phone: 505-272-2231 Fax: 505-925-4015

### **Post-operative Rehabilitation Protocol**

**SLAP Repair, Bankart Repair, or Biceps Tenodesis**

**Most patients will start PT at 6 weeks post op**

#### **Phase I: Protective Phase (day 1 to week 6)**

Weeks 0-2

- Shoulder sling x 6 weeks
- Sleep in sling x 3 weeks
- Shoulder, elbow, and hand ROM
  - **NO** resisted active isolated biceps activity (elbow flexion or forearm supination x 6 weeks)
  - **NO** active external shoulder rotation, extension, or abduction
- Hand gripping exercises
- Passive and gentle active assisted ROM exercises
  - Codmans exercises
  - Flexion and scaption to 90<sup>0</sup>
  - ER to 30<sup>0</sup> x 4 weeks
  - IR to 45<sup>0</sup>
  - Scapulothoracic AROM in all planes
- Submaximal isometrics for shoulder musculature
- Cryotherapy PRN

Weeks 3-4

- Continue shoulder, elbow, and hand ROM (as above)
  - Advance IR to 60<sup>0</sup>
- **NO** active ER, extension, or elevation
- Initiate scapulothoracic isometrics
- Initiate proprioceptive training (rhythmic stabilization drills)
- Gentle submaximal shoulder isometrics
- Continue use of cryotherapy PRN

Weeks 6: **Most patients will start PT at 6 weeks post op**

- Continue exercises as above
- Continue to gradually improve ROM

- Flexion and Scaption to 145<sup>0</sup> (can progress further if tolerated)
- ER to 50<sup>0</sup>
- IR to 60<sup>0</sup>
- Full ROM should be achieved at 8-10 weeks
- Initiate limited AROM/AAROM of shoulder to 90<sup>0</sup> flexion or abduction
- Continue submaximal shoulder isometrics
- Can begin AROM supination (no resistance/elbow flexed)
- **NO** biceps loading until week 12

Clinical milestones to progress to Phase II:

- Flexion to 125<sup>0</sup> (can progress further if tolerated)
- Abduction to 70<sup>0</sup>
- Scapular plane IR to 40<sup>0</sup>
- ER to 40<sup>0</sup>

## **Phase II: Moderate Protection Phase (Weeks 7-12)**

Week 7-9

- Continue to progress AROM/PROM (Full by week 10)
- Begin isotonic rotator cuff IR/ER strengthening with bands/weights
- Progressions
  - Submaximal to maximal
  - Slow speeds to fast speeds
  - Known patterns to random patterns
  - Eyes open to eyes closed
  - OKC to CKC
- Exercises
  - Scapular plane elevation
  - Side lying ER
  - Standing rotator cuff series
  - Prone horizontal abduction/extension
- Manual resistance to shoulder
- **NO** biceps loading until week 10

Week 10-12

- Initiate stretching exercises if ROM not full by 10 weeks
  - Flexion and scaption to 180<sup>0</sup>
  - ER at 90<sup>0</sup> abduction to 90<sup>0</sup>
  - IR at 90<sup>0</sup> abduction to 79<sup>0</sup>
- Begin submaximal isometrics and AROM for biceps
- Begin more aggressive exercises for rotator cuff and scapulothoracic musculature
- Continue isotonic progressive resistive exercises and manually resisted exercises
- Progress ER motion to 90/90 position
- Begin submaximal exercises above 90<sup>0</sup> of elevation

Clinical milestones to progress to Phase III

- Flexion to 160<sup>0</sup>
- Scapular plane ER to 65<sup>0</sup>
- Abduction to 70<sup>0</sup>

- Scapular plane IR to 40<sup>0</sup>
- ER to 40<sup>0</sup>
- ER at 90<sup>0</sup> to 45<sup>0</sup>
- Scapular plane IR full
- IR at 90<sup>0</sup> abduction to 45<sup>0</sup>
- Abduction to 150<sup>0</sup>
- Near full symmetrical posterior shoulder mobility
- 4/5 MMT for scapular/rotator cuff muscles
- AROM in appropriate ranges without pain

### **Phase III: Minimum Protection Phase (Weeks 13-20)**

#### **NO THROWING OR OVERHEAD SPORTS UNTIL WEEK 20**

Goals:

- Full non painful AROM/PROM
- Restoration of muscle strength, power and endurance
- No pain or tenderness
- Gradual initiation of functional activities

Weeks 13-16

- Continue stretching exercises if needed
- Maintain full ROM
  - ER at 90<sup>0</sup> abduction up to 120<sup>0</sup> (throwers)
- Continue phase II exercise progression and principles
- Isotonic elbow flexion and forearm supination
- Can increase intensity and decrease reps
- Initiate light plyometric activities (2 handed, progressing to one)

Weeks 16-20 - **NO THROWING OR OVERHEAD SPORTS UNTIL WEEK 20**

- Continue to progress resistive exercises
- Continue to progress plyometric exercises
- Continue stretching as needed

Clinical Milestones to progress to Phase IV

- Within 10<sup>0</sup> of full active range of motion from opposite side in all planes of motion
- Full symmetrical posterior shoulder mobility
- 5/5 isometric shoulder MMT
- 5/5 scapulothoracic and rotator cuff MMT

### **Phase IV: Advanced Strengthening Phase (weeks 21-26)**

Goals:

- As above
- Progress functional activities

Weeks 21-26

- Progress interval sports programs
  - Begin throwing from mound (weeks 24-28)

