

# SLAP Repair – Rehabilitation Guidelines

*Derek Plausinis, MASC, MD, FRCSC*

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## **0 to 2 Weeks Post-op**

- Rest in sling, and sling for sleep
- Start *passive* shoulder range of motion (keep the shoulder muscles quiet and let the good arm move the repaired shoulder):
  - Forward elevation: 90°
  - Internal rotation: to chest wall
  - External rotation: not beyond 10° degrees
- Active range of motion for elbow, wrist and hand
- *No resisted elbow flexion for 6 weeks*

## **2 to 4 Weeks Post-op**

- *Only passive* shoulder range of motion (keep the shoulder muscles quiet and let the good arm move the repaired shoulder):
  - Forward elevation: 120° maximum
  - External rotation: not beyond 20° degrees

## **4 to 6 Weeks Post-op**

- Slowly wean from and discontinue sling
- *Passive and active-assisted* shoulder range of motion (you may now use partial muscle function in the repaired shoulder with motion exercises)
  - Forward elevation: as tolerated, no restriction
  - External rotation: not beyond 30° degrees
  - Avoid extreme abduction and external rotation
- Isotonic external and internal rotation with light rubber band
- No resisted elbow flexion

## **6 Weeks to 3 months Post-op**

- Use arm for all light activities as able, including reaching. Become fully two-handed for all light, unresisted activities.
- Start physiotherapy:
  - Progress range of motion, no restrictions
  - Gentle progressive strengthening program

## **3 to 6 months Post-op**

- May use arm gradually for resisted/physical activity below shoulder height

## **After 4 months Post-op**

- May start some restricted sports activity, and progress slowly and gradually as pain and comfort permit
- There are no formal restrictions for your shoulder. Gradually return to all activities as pain and comfort permit. It can take 9 mth to a year to achieve maximum benefit, but activities can be progressed in a very gradual fashion.