SLAP Repair – Rehabilitation Guidelines

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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):
  o Forward elevation: 90°
  o Internal rotation: to chest wall
  o 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):
  o Forward elevation: 120° maximum
  o 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)
  o Forward elevation: as tolerated, no restriction
  o External rotation: not beyond 30° degrees
  o 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:
  o Progress range of motion, no restrictions
  o 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.