



**Columbia University  
Sports Medicine and  
Rehabilitation**

**Louis U. Bigliani, MD**

Office (212) 305-5564  
Fax (212) 305-0999

**Christopher S. Ahmad, MD**

Office (212) 305-5561  
Fax (212) 305-4040

**William N. Levine, MD**

Office (212) 305-0762  
Fax (212) 305-4040

**AJ Yenchak, PT, DPT, CSCS**

Office  
Fax

**Appointment Scheduling**

(212) 305-4565

**Office Locations:**

16 East 60<sup>th</sup> Street  
New York, NY 10022  
212-326-3333  
212-326-3345 (fax)

161 Ft. Washington Ave.  
New York, NY  
212-305-5561

500 Grand Ave  
Englewood, NJ 07020

**Website:**

[www.nyp.org/columbiaortho](http://www.nyp.org/columbiaortho)

**ARTHROSCOPIC SLAP LESION REPAIR (TYPE II)  
PROCEDURE**

**PHYSICAL THERAPY PROTOCOL**

**PHASE 1---IMMEDIATE POSTOPERATIVE PHASE (Postoperative day 1 to**

**Week 6)**

- Goals:** Protection of anatomic SLAP repair  
Control postoperative pain / inflammation  
Promotion of shoulder musculature cocontraction  
Retard muscular atrophy  
Early controlled motion glenohumeral / scapulothoracic joints

**Weeks 0-2**

- Sling 4 weeks or per MD recommendation
- Sleep in shoulder sling / brace for 4 weeks
- Elbow, wrist, hand ROM, gripping exercise
- PROM / light AAROM glenohumeral joint
  - Flexion to 60 degrees (week 1)
  - Flexion to 70-75 degrees (week 2)
  - ER to 10 degrees
  - IR to 30 degrees
- Submaximal isometrics for shoulder musculature (no biceps)
- No active shoulder ER / Extension / Abduction
- Initiate proprioceptive training end of week 1

**Week 3-4**

- Discontinue sling / immobilizer at 3-4 weeks or per MD recommendation
- Continue PROM / AAROM (progression based on evaluation of patient and subjective patient report)
  - Flexion to 90 degrees
  - Abduction to 80 degrees
  - ER to 30 degrees
  - IR to 40 degrees
- Initiate scapular neuromusculature reeducation (rhythmic stabilization)
- Continue shoulder isometrics (no bicep contractions)
- Initiate shoulder isotonic program at 0 deg of shoulder abduction ER / IR

- Cryotherapy with progression to thermal (heat) at week 3

**Week 5-6:**

- Gradually improve ROM of shoulder
  - Flexion to 145 degrees
  - ER at 45 degrees abduction: 45-50 degrees
  - ER at 45 degrees abduction: 55-60 degrees
  - At 6 weeks begin slow progression toward ER at 90° abduction – progress to 30-40° ER
- May initiate stretching exercises
- Continue isotonic tubing ER/IR (arm at side)
- Initiate Active Shoulder Abduction (without resistance)
- Initiate “Full Can” Exercise (Weight of Arm)
- Initiate Prone Rowing, Prone Horizontal Abduction
- NO Biceps Strengthening

**II. Phase II – Intermediate Phase: Moderate Protection Phase (Week 7-14)**

Goals: Gradually restore full ROM (week 10-12)  
 Protect the integrity of the surgical repair  
 Restore muscular strength and balance

**Week 7-9:**

- Gradually progress ROM:
  - Flexion to 180 degrees
  - ER at 90 degrees abduction: 90-95 degrees
  - IR at 90 degrees abduction: 70-75 degrees
- Continue to progress isotonic strengthening program
- Continue PNF strengthening
- Initiate Throwers Ten Program

**Week 10-12:**

- May initiate slightly more aggressive strengthening
- Progress ER to Throwers Motion
  - ER at 90 degrees abduction: 110-115 in throwers (Week 10-12)
- Progress isotonic strengthening exercises to include manual resistance
- Continue all stretching exercises
- \*\*Progress ROM to functional demands (i.e. overhead athlete)
- Continue all strengthening exercises

**III. Phase III – Minimal Protection Phase (Week 14-20)**

Goals: Establish and maintain full ROM (throwers motion)  
 IMPROVE muscular strength, INITIATE power and endurance  
 Gradually initiate functional activities

Criteria to enter Phase III:

- 1) Full non-painful ROM
- 2) Satisfactory stability

- 3) Muscular strength (good grade or better)
- 4) No pain or tenderness

**Week 14-16:**

- Continue all stretching exercises (capsular stretches)
- Maintain Throwers Motion (emphasis on shoulder ER)
- Continue strengthening exercises:
  - Throwers Ten Program with progression to Advanced Throwers Program
  - PNF Manual Resistance
  - Endurance training (stabilization/perturbation at end range 90/90 position)
  - Initiate light plyometric program
  - Restricted sport activities (light swimming, half golf swings)

**Week 16-20:**

- Continue all exercise listed above
- Continue all stretching
- Continue Throwers Ten Program / Advanced Throwers 10 program
- Continue Plyometric Program (90/90 positioning plyos)
- Initiate interval sport program (throwing)  
\*\*See interval Throwing Program

IV. **Phase IV – Advanced Strengthening Phase (Week 20-26)**

Goals: Enhanced muscular strength, power and endurance  
Progress functional activities  
Maintain shoulder mobility

Criteria to enter Phase IV:

- 1) Full non-painful ROM
- 2) Satisfactory static stability
- 3) Muscular strength 75-80% of contralateral side
- 4) No pain or tenderness

**Week 20-26:**

- Continue flexibility exercises
- Continue isotonic strengthening program
- PNF manual resistance patterns
- Plyometric strengthening
- Progress interval sport programs

V. **Phase V – Return to Activity Phase (Month 6 to 9)**

Goals: Gradual return to sport activities

Maintain strength, mobility and stability

Criteria to enter Phase V:

- 1) Full functional ROM
- 2) Muscular performance isokinetic (fulfills criteria)
- 3) Satisfactory shoulder stability upon examination
- 4) No pain or tenderness

**Exercises:**

- Gradually progress sport activities to unrestricted participation
- Continue stretching and strengthening program