

## REHABILITATION FOLLOWING ARTHROSCOPIC SLAP LESION REPAIR or posterior labral in The OVERHEAD THROWER

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### I. Phase I – Immediate Postoperative Phase “Restrictive Motion” (Day 1 to Week 6)

Goals: Protect the anatomic repair  
Prevent negative effects of immobilization  
Promote dynamic stability  
Diminish pain and inflammation

#### Week 0-2:

- Sling for 4-6 weeks (slight abduction sling) Physician Decision
- Sleep in immobilizer for 4 weeks
- Elbow/hand ROM
- Hand gripping exercises
- Passive and gentle active assistive ROM exercise
  - Flexion to 70 degrees (Week 2: Flexion to 90 degrees)
  - Elevation in scapular plane to 60 degrees
  - ER/IR with arm in scapular plane
  - ER to 10-15 degrees
  - IR to 45 degrees
- \*\*NO active ER or Extension or Abduction
- Submaximal isometrics for shoulder musculature
- NO isolated Biceps Contractions
- Scapular muscle training through manual resistance in sling (seated)
  - Neuromuscular control drills
- Address posture
- Cryotherapy, Laser, modalities as indicated

#### Week 3-4:

- Continue sling use until Physician or PT advises (Physician Decision)
- Sleep in immobilizer until Week 4
- Continue gentle ROM exercises (PROM and AAROM)
  - Flexion to 90 degrees
  - Abduction to 75-85 degrees
  - ER in scapular plane and 35° abd to 25-30 degrees
  - IR in scapular plane and 35° abd to 55-60 degrees
- \*\*NOTE: Rate of progression based on evaluation of the patient.
- No active ER, Extension or Elevation
- Initiate rhythmic stabilization drills
- Initiate proprioception training
- Continue scapular training
- Tubing ER/IR at 0 degrees Abduction
- Standing rowing with tubing
- Continue isometrics
- Continue use of cryotherapy

#### Week 5-6:

- Gradually improve ROM
  - Flexion to 145 degrees
  - ER at 45 degrees abduction: 45-50 degrees
  - IR at 45 degrees abduction: 55-60 degrees
  - At 6 weeks begin light and gradual ER at 90° abduction – progress to 30-40° ER
- May initiate stretching exercises
- May initiate light (easy) ROM at 90 degrees Abduction
- Continue 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)  
Preserve 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 (optional)
- Initiate Throwers Ten Program (week 7-8)

### **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)
  - Initiate supine cross body stretching at week 12 (lightly)
- Progress isotonic strengthening exercises
- Initiate Advanced Throwers Ten program at week 12-14
- Continue all stretching exercises
- \*\*Progress ROM to functional demands (i.e. overhead athlete)
- Continue all strengthening exercises
- Initiate light plyometric balls throws (2 hand only & close to body) chest pass

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

Goals: Establish and maintain full ROM  
Improve muscular strength, 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 (Especially ER)
- Initiate Interval Hitting Program (if appropriate) at week 14
- Continue strengthening exercises:
  - Initiate Advanced Throwers Ten Program
  - Manual Resistance
  - Endurance training
  - Progress plyometric program to 1 hand throws (1 or 2 lb plyoball only)
  - Restricted sport activities (light swimming, half golf swings)

#### **Week 16-20:**

- Continue all exercise listed above
- Continue all stretching
- Continue Advanced Throwers Ten Program
- Continue Plyometric Program
- Initiate interval sport program (throwing, etc)  
\*\*See interval Throwing Program

- Interval Throwing program Phase I

#### **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
- 5) Completed Plyometric program without pain

#### **Week 20-26:**

- Continue flexibility exercises
- Continue isotonic strengthening program
- PNF manual resistance patterns
- Plyometric strengthening
- Progress interval sport programs
  - Progress off the mound throwing once ITP Phase I is completed without problems

#### **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
- 4) No pain or tenderness

Exercises:

- Gradually progress sport activities to unrestrictive participation
- Continue stretching and strengthening program
- Continue Throwers Ten Program, stretches, & plyometrics once return to play

Criteria To Return to Play:

- Satisfactory clinical exam & cleared by Physician
- ROM which meets criteria
- Strength tests which meets criteria
- Completed plyometric program without pain
- Passed Functional Testing for throwers