

Arthroscopic SLAP/Bankart Repair Protocol Andrea Saterbak, MD

Phase I: (0-2 weeks)

Exercises performed independently at home.

- 1. Sling should be worn for 4 weeks. May remove for dressing, hygiene, and tabletop use of hand, wrist, or elbow.
- 2. Exercises:
 - a. Codman's (pendulum) 4-5x/day
 - b. Elbow ROM
 - c. Tennis ball for grip
 - d. Co-contracture of biceps/triceps at 0, 30, 60, 90, and 120 deg

Phase II: (2-12 weeks)

Start PT at 2 weeks post op

Full ROM at 8 weeks

- 1. Stretching/ROM (2x/day) careful incremental ROM restoration in the hypermobile patient.
 - a. Codman's (pendulum) exercises to warm up.
 - b. Four corner stretch
 - c. AAROM (wand exercises) in all movements full ROM as tolerated accept minimal pain only
 - d. Avoid adduction with forward flexion until 3 months
- Strengthening (begin at 6 weeks) pain free ROM only (once/day, 3-4 days/week).
 - a. Isometric exercises
 - b. Isotonic exercises strengthening exercises #1-8 as tolerated
 - a. Perform with free weights only (No theraband except IR #6)
 - 1. Repetitions 20-50 reps before progressing in wt.
 - 2. Emphasize high reps, low weights
 - 3. Start against gravity without weight; progress as tolerated
 - 4. Maintain arm at side of the body for all resistance training.
 - b. Goals:
 - 1. Overhead athlete: 3-5 lbs x 50 reps
 - 2. General rehab candidate: 1-3 lbs x 50 reps
 - 3. Progress weight as tolerated painfree
 - c. Address scapular stabilization exercises as needed.

Phase III: (3-6 months)

- 1. Return to activity:
 - a. Overhead lifting/traction (pull ups) as tolerated at 4 months.
 - b. Throwing activity: start 4 months post op.
 - c. Contact activities: start 4 months post op if PT goals have been met.
 - d. Swimming: start 4 months post op.

2. Maintenance:

a. Continuation of isotonic strengthening exercises should be encouraged 1-2x/week for 3-6 months.

This protocol provides you with general guidelines for the post-operative rehabilitation of the patient following arthroscopic SLAP repair. Specific changes in the program will be made by the physician as appropriate for individual patients.

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