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SUPERIOR LABRAL REPAIR

<u>Postop</u>	<u>Goals</u>	<u>Range of Motion</u>	<u>Shoulder Immobilizer</u>	<u>Exercises</u>
Phase I Weeks 0-4 PT 1-2x/week HEP daily	Protect surgical repair Avoid activities that stress repair - Active biceps exercises - Forceful extensions	A/AAROM Limits: - 45° ER - 140° forward flexion - IR as tolerated	Sling at all times including sleep Remove for hygiene & exercises	Wrist & hand ROM, isometric abduction, gripping exercises External/ internal rotation w/ elbow at side Begin cuff/ deltoid isometrics at 2 weeks; closed chain scapula
Phase II Weeks 4-8 PT 2-3x/week HEP daily	Protect surgical repair Avoid activities that stress repair - Active biceps exercises Forceful extensions	Increase forward flexion and IR/ER to full ROM as tolerated	None	Advance isometrics in Phase I to use of theraband, continue wrist/hand ROM and grip strengthening Begin prone extensions and scapular stabilizing exercises, gentle joint mobilizations
Phase III Weeks 8-12 PT 2-3x/week HEP daily		Progress to full AROM without discomfort	None	Advance theraband exercises to use of weights and progress Phase II exercises Cycling and upper body ergometer at 8 weeks Outdoor running and planks/push-ups at 10 weeks
Phase IV Weeks 12-20 * PT 1x/week HEP daily		Full and pain-free	None	Advance Phase III exercises Begin functional progression to return to previous activity level ** Throwers may begin interval throwing program at 16 weeks

* Patient may return to weight room at 3 months

** Patient may return to competitive sports, including contact sports, by 5 months if approved

IF QUESTIONS: PLEASE CALL 469-800-7200