



Sea to Sky Orthopaedics Athletic Injuries and Arthroscopy
PO Box 1275, Whistler BC, V0N 1B0 | T 604 905 4075 F 604 905 4073 | www.seatoskyorthopaedics.com

Labral Surgical Repair - SLAP

Goal of Surgery

- to re-establish normal stability of the joint and maintain a good range of motion.

Surgical Procedure

- identify and address pathology (or damage)
- involves either repairing the ligaments that run in the joint capsule that have been pulled off the edge of the socket or tightening abnormally loose glenohumeral ligaments.

Post Operative Protocol

Sling for 6 weeks (including night time) to protect your repair.

NO physiotherapy until after your first assessment at 6-7 weeks post-surgery.

Cracking/popping sounds (similar to cracking knuckles) are common and part of the regular post-operative course.

Weeks 0 – 3

- Forward flexion – Max 90 deg. – Wrist /forearm exercises
- External rotation – Max 0 deg.
- RC Isometrics
- NO lifting
- NO resisted biceps x 8 wks (no resisted elbow flexion/ forearm supination eg. No lifting grocery bags, screwing, opening doors)

Weeks 6 - 7

- Forward flexion – 135 deg
- External rotation - 30 deg.
- Internal Rotation – belt line
- Abd/ER to 50 deg.

Weeks 8 - 9

- FF –full
- ER – 45 deg.
- IR – full

Begin Week 6

- Resisted program (see weight training)
- FF,ER, Shrugs, rows
- Gradually increase external rotations to full by 12 wks

Weight Training

- No long lever arms
- No abducted positions
- No impingement positions
- Avoid anterior capsular stress (e.g. no wide grip bench)

Return to Activities

- Computer - As soon as tolerated
- Golf - 12 weeks



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- Tennis - 4 months
- Throwing (toss) - 4 months
- Play baseball - 5 months if comfortable
- Contact sports (including mountain biking, skiing, snowboarding) - 6 months