



ADVANCED ORTHOPAEDIC SPECIALISTS



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SUPERIOR LABRAL TEAR REHABILITATION PROTOCOL

	Range of Motion*	Immobilizer	Avoid	THERAPEUTIC EXERCISE**
PHASE I 0 - 4 weeks	Forward Flexion Passive range of motion in scapular plane	Worn at all times except for hygiene and therapeutic exercise	Lifting Strengthening Active ROM	Wrist/hand range of motion, grip strengthening, isometric abduction, external/internal rotation exercises with elbow at side, gentle elbow range of motion
Phase II 4 - 6 weeks	Increase forward flexion, and internal/external rotation to full motion as tolerated Forward passive ROM in all planes	Discontinue sling at 6 weeks	Lifting Strengthening Active ROM	Advance isometrics in phase I to use of a theraband, continue with wrist/hand ROM and grip strengthening, begin prone extensions, and scapular stabilizing exercises, gentle joint mobs
Phase III 6 - 12 weeks	At 8 weeks begin active range of motion Begin to strengthen at 10 weeks	None		Advance theraband exercises to use of weights, continue with and progress exercises in phase II, begin upper body ergometer
Phase IV 12 weeks - 6 months***	Full without discomfort	None		Advance exercises in phase III, begin functional progression to work/sport, return to previous activity level****

*Patient is required to complete stretching exercises 3 times per day

**6-8 weeks is required for healing of the biceps labrum, therefore, avoid activities that stress the repair (i.e. active biceps exercises, forceful extension, etc.)

***Patient may return to competitive sports, including contact sports, by 6 months, if approved

****Patient may return to the weight room at 3 months, if appropriate