

Bonnie P. Gregory, MD
SUPERIOR LABRAL REPAIR
REHABILITATION PROTOCOL

	RANGE OF MOTION	IMMOBILIZER	EXERCISES
<i>PHASE I</i> <i>0-4 weeks</i>	Active/active-assisted stretch to 45 ° ER, 140° forward flexion, IR as tolerated	0-2 weeks: Immobilized at all times day and night Off for gentle home exercise only 2-4 weeks: Worn daytime only	Wrist/hand ROM, grip strengthening, isometric abduction External/internal rotation w/ elbow at side Begin cuff/deltoid isometrics at 2 weeks; closed chain scapula
<i>PHASE II</i> <i>4-8 weeks*</i>	Increase forward flexion and internal/external rotation to full ROM as tolerated	None	Advance isometrics in Phase I to use of theraband, continue with wrist/hand ROM and grip strengthening Begin prone extensions and scapular stabilizing exercises, gentle joint mobs
<i>PHASE III</i> <i>8-12 weeks</i>	Progress to full AROM without discomfort	None	Advance theraband exercises to use of weights and progress Phase II work Cycling and upper body ergometer at 8 weeks Outdoor running and planks/push-ups at 10 weeks
<i>PHASE IV</i> <i>12-20 weeks</i>	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

- ❖ 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 the weight room at 3 months, if appropriate
- ❖ Patient may return to competitive sports, including contact sports, by 5 months, if approved

For any questions or concerns regarding the protocol or rehabilitation process please contact:

Dr. Gregory's Office:
Phone: 713-486-7080
Fax: 713-452-4143

<https://www.bonniegregorymd.com/>

