

Bernard R. Bach, M.D.
Charles Bush-Joseph, M.D.
Midwest Orthopaedics at RUSH
Sports Medicine
1725 W Harrison, Suite 1063
Chicago, IL 60612
312-432-2300



Physical Therapy Prescription

Patient Name: _____ Date: _____

Diagnosis: Right/Left Shoulder SLAP repair, with/without debridement, with/without biceps tenotomy

Date of Surgery: _____

- Evaluate and Treat Provide patient with home exercise program
- Weeks 1-4
 - ◆Progress ROM as tolerated – PROM / AAROM / AROM
(Goal – 90 degrees forward flexion/ 20 degrees ER at side)
 - ◆No IR behind back, No ER behind head
 - ◆No resisted FF/ biceps motion
- Weeks 4-8
 - ◆D/C sling
 - ◆Progress AROM to include abduction/ internal rotation behind back to waist
 - ◆Increased AROM with increased stretching
(Goal – 140 degrees forward flexion, 40 degrees ER at side)
 - ◆Begin isometrics and light band strengthening remaining within ROM limitations
 - ◆Begin scapular stabilization exercises and core strengthening
- Weeks 8-12
 - ◆Advance strengthening as tolerated, begin light weights up to 5 pounds
 - ◆Gently passive stretching to continue daily to gain full ROM
- Weeks 12-52
 - ◆Strengthening only 3 times per week
 - ◆Begin eccentrically resisted motion, plyometrics, proprioception (body blade), closed chain exercises
 - ◆Advance conditioning and sport/job specific rehab
 - ◆Return to throwing at 4.5 months, from pitcher's mound at 6 months
- Other:
 - Modalities
 - Electric Stimulation Ultrasound Iontophoresis TENS Heat before/after
 - Ice before/after exercise
 - Functional Capacity Exam
 - Work Hardening/Conditioning

Frequency: _____ x/ week x _____ weeks

Signature: _____

Please fax a copy of patient report to 312-942-1517 at least 3 days prior to patient appointment.