

SUPERIOR LABRAL TEAR REHABILITATION PROTOCOL

	RANGE OF MOTION*	IMMOBILIZER	THERAPEUTIC EXERCISE**
PHASE I 0-4 weeks	Active/Active-Assistive: stretch to 40 °of external rotation, and 140° of forward flexion - internal rotation as tolerated	Worn at all times except for hygiene and therapeutic exercise	wrist/hand ROM, grip strengthening, isometric abduction, external/internal rotation exercises with elbow at side with elbow at side, gentle elbow ROM
PHASE II 4 - 6 weeks	Increase forward flexion, and internal/external rotation to full motion as tolerated	None	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	Progress to full active motion without discomfort	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 the weight room at 3 months, if appropriate

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

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