

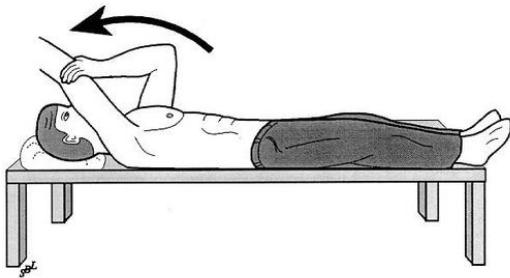
ROTATOR CUFF REPAIR Rehabilitation Protocol

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PHASE I: Protected ROM (6 weeks)

- May remove dressing and shower postop day # 3.
- Ice encouraged for the first week at a minimum: should be used 3-4 times per day once the nerve block has worn off.
- Sling should be in place when not performing exercises.
- May start active scapular mobility exercises at 3 to 4 weeks – Must keep the shoulder musculature relaxed.
- Avoid all active and active assistive exercises until cleared by the surgeon. This includes pulley exercises, wand and supine assisted exercises.
- Initiate exercise program 3 times per day:
 - Immediate elbow, forearm and hand range of motion out of sling
 - Pendulum exercises
 - Passive scapular plane elevation as tolerated (starting at 4 weeks)- see below
 - Passive external rotation of the shoulder to tolerance (starting at 4 weeks)- see below



PHASE II: Progressive ROM (*6 to 12 weeks*)

- May discontinue sling.
- Lifting restriction of 5 pounds should be reinforced with patient.
- Start AAROM and AROM – includes pulleys, wand and supine gravity assisted exercises. Emphasize all motions including IR behind the back at 10-12 weeks.
- Isolate and strengthen scapular stabilizers.
- Progress PROM and terminal capsular stretching of the shoulder as needed.
- Avoid AROM in positions of subacromial impingement.
- May start gentle isometric rotator cuff strengthening at 8 weeks

PHASE III: (*> 12 weeks*)

- Discontinue formal lifting restrictions.
- Progress to advance rotator cuff and shoulder strengthening (Theraband, dumbbells, Hughston's exercises, etc). Include home cuff strengthening program. Continue to emphasize scapular stabilizers.
- Equate active and passive range of motion. Encourage scapulohumeral mechanics during active shoulder motion.
- Simulate work/recreational activities as rotator cuff strength and endurance improve.