

Rotator Cuff Repair:

General guidelines

- Beginning phases- protect graft site while maximizing ROM within protocol limits
- Progress safely out of sling per MD instruction
- If subscapularis was repaired- ER less than 30 degrees for the first 4 weeks.

Rehabilitation Goals:

- Seen post op day 3-5 (replace surgical bandage with gauze and Tegaderm)
- 1/week for 6 weeks (can be more if motion restrictions present)
- 2-3/week for 6 weeks+

Phase 1: Protective Phase 0-7 days

- Pendulums
- Wrist/hand ROM
- Scapular retraction
- PROM limits:
 - Flexion 140
 - ER 30
 - Abduction 60
 - IR to stomach

Phase 2 1-6 weeks

- PROM:
 - Flexion: No limit
 - Abduction to 80 degrees
 - ER to 40 degrees
 - IR as tolerated no behind the back in this phase
- Continue with scapular retraction
- Progress wrist exercises as tolerated as long as the arm is supported
- Begin AA elbow ROM as tolerated (be aware if there was a biceps tenodesis)

Phase 3: 6-8 weeks

- Begin Isometrics
 - 50% sub max
 - Flexion
 - ER
 - IR
 - Abduction
 - Extension
- Begin AAROM as tolerated
 - Wand flexion and ER
 - Pulleys into flexion and scaption
 - Table slides

- Begin Scapular strengthening
 - Consider prone I's T' Y's and rows

Phase 4: 8-12 weeks

- Begin AROM with lawn chair progression (supine -> semi recumbent -> standing)
 - Be aware of compensatory movement. Progressing ahead of strength can lead to biceps tendonitis and upper trap trigger points.
 - Consider supine ER -> side lying ER as tolerated
 - Supine ABC
- Continue scapular strengthening exercises
 - Can begin loading scapular exercises as tolerated
 - Be aware of biceps tendinitis
- Begin closed chained standing exercises
 - Towel on wall in pain free ranges
 - Finger ladder etc.

Phase 5 12-16 weeks

- Begin progressive RTC Strengthening
 - Free weights 1-5 lb -> band progression using RPE
 - Watch for development of biceps tendinitis as load increases
- Continue to progress scapular exercises including wall walk as and scapular clock exercises

Phase 6 16 weeks to 12 months

- Begin eccentrically resisted exercises: weighted ball, body blade etc
- Begin sport related rehab including advanced conditioning
- For throwers consult MD before beginning throwers 10 progression or other throwing progression