



Rehabilitation Protocol Rotator Cuff Repair

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PHASE I: PROTECTED ROM

(0 to 6 weeks after surgery)

- Patients may shower on post-op day number 2.
- Sutures will be removed by surgeon in 7 to 10 days.
- Ice or cold flow systems encouraged for the first week at a minimum: should be used 3-4 times per day.
- Sling should be in place when not performing exercises.
- Hold pendulum exercises until 4 weeks following surgery
- May start active scapular mobility exercises at 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
 - Passive external rotation of the shoulder to tolerance – instruct family member

PHASE II: PROGRESSIVE ROM

(6 to 12 weeks after surgery)

- May discontinue sling.
- Lifting restriction of 5 pounds should be reinforced with patient.
- Begin PROM and capsular stretching of the shoulder as needed – elevation and external rotation as tolerated
- Start AAROM and AROM at 8 weeks – includes pulleys, wand and supine gravity assisted exercises. Emphasize all motions except IR behind the back until 3 months.
- Isolate and strengthen scapular stabilizers.
- Avoid resisted training or strengthening. Avoid AROM in positions of subacromial impingement.

PHASE III: FULL FUNCTION

(>12 weeks after surgery)

- Discontinue formal lifting restrictions.
- Start progressive rotator cuff and shoulder strengthening at 3 months – isometrics initially
- Initiate isotonic strengthening at 4 months (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.