

## ROTATOR CUFF REPAIR PROTOCOL

### Phase I (Weeks 6 to 12)

#### *Goals:*

- Maintain integrity of repair
- Gradually normalize PROM
- Decrease pain and inflammation
- Prevention of muscular inhibition

#### *Treatment:*

##### **WEEK 6:**

- PROM as tolerated, with flexion to 90
- Abduction no greater than 45
- IR/ER rotation to 45 each
- Grade I/II oscillatory movements for pain control
- Scapular mobs grade I/II in all planes
- UBE at week 6
- Scapular stabilization week 6
- Light isotonic IR/ER/elbow flexion, week 6
- Early elbow ROM and ball squeezes for hand are initiated
- Ice and modalities as needed to pain and inflammation
- Concomitant SLAP repair, no bicep curls x6 weeks post-op

##### **WEEK 8:**

- PROM as tolerated, with flexion to 120
- Abduction 90
- ER/IR to 45-60 in scapular plane
- Grade II/III inferior/posterior capsular mobs
- Scapular mobs, all planes, as needed
- All movements should be within pts pain tolerance
- Initiate AAROM (pullers/wand) within passive non-painful range

##### **WEEK 9:**

- Sub-maximal isometric exercises
- PROM as tolerated, with flexion to 120+
- ER/IR in scapular plane and with 60deg of abduction
- Grade III/IV posterior/inferior capsular mobs
- Scapular mobs, all planes, as needed
- All movements should be within the pts pain tolerance

##### **WEEK 10:**

- PROM as tolerated with flexion 160+
- Full, passive IR/ER in scapular plane
- ER 90 at 90deg abduction
- IR 60 at 90deg abduction
- All movements should be within the pts pain tolerance
- Small tear <1cm, progression based on pt response
- Medium tear 1-5cm, check with surgeon
- Large tear >5cm, add 2 weeks

## **Phase II (Weeks 12 to 16)**

### *Goals:*

- Optimize healing environment
- Full PROM by week 10 -12
- Full AROM by weeks 12 to 14
- Restore dynamic shoulder stability
- Initiate strength training of ST/GH articulations

### *Treatment:*

- Continue stretching exercises in all planes
- Negative shoulder shrug sign with performance of exercises
- Initiate and progress concentric/eccentric strengthening of:
  - Rotator cuff (thrower's ten)
  - Deltoid (lateral/frontal raises and shoulder extension)
  - Periscapular musculature (Blackburn exercises/lateral pull downs/serratus exercises)
- Initiate and progress isotonic elbow flexion/extension
- Initiate dynamic shoulder stabilization (PNF rhythmic stabilization/contract-relax techniques)

## **Phase III (Weeks 16 to 24)**

### *Goals:*

- Maintain full, non-painful AROM
- Enhance functional use of shoulder
- Facilitate gradual return to recreational/sport activities
- Improve muscle strength, endurance and power

### *Treatment:*

- Initiate and promote self-capsular stretching, if necessary
- WEEK 16 to 20:
  - Initiate return to throw program when all established criteria has been met
- WEEK 18:
  - Swimming, golf, tennis progression may begin once surgeon clears
  - Maintain high therex volume and increase intensity
  - Introduce sport and job-specific strengthening, if applicable

## **Phase IV (Week 24 and beyond)**

### *Goals:*

- Return to strenuous work activities and gradual return to strenuous sport activities as tolerated per the surgeons discretion