

Standard Rotator Cuff Repair Protocol

Surgeon must specify on the referral any specific requests or deviations that fall outside the scope of this protocol.

| Phase I (0-4 weeks) | Phase II (Weeks 4 - 8) | Phase III (Weeks 8 - 12) | Phase IV (Weeks 12 – 26 weeks) |
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| <p style="text-align: center;">PRECAUTIONS</p> <ul style="list-style-type: none"> • Protection (sleeping, posture, sling with axillary towel roll) • Passive ER with wand (limit to 20°, if repair is subscapularis) • If biceps tenodesis performed, no AROM of the elbow until week 4 <p style="text-align: center;">EXERCISES</p> <ul style="list-style-type: none"> • PROM unlimited within pain tolerance • Pendulums • AROM: elbow, wrist, hand • Passive table-slide FF • Scapular exercises (retraction, shrugs, rolls, etc.) • PT assisted PROM scapular plane | <p style="text-align: center;">PRECAUTIONS</p> <ul style="list-style-type: none"> • Wean from sling; goal to D/C sling at 6 weeks • If the repair was of the subscapularis, slowly progress wand ER past 20° to tolerance • If biceps tenodesis performed, initiate light resisted elbow exercise at week 6-8 • No Isotonic strengthening <p style="text-align: center;">EXERCISES</p> <p style="text-align: center;">Week 4-6</p> <ul style="list-style-type: none"> • Begin AAROM – IR/ER in scap plane; supine wand FLEX in scap plane <p style="text-align: center;">Week 5-6</p> <ul style="list-style-type: none"> • Begin AROM • Sidelying ER • Supine forward elevation progression • Initiate scapular stabilization • Sub-maximal isometrics • Open chain proprioception <p style="text-align: center;">Week 7-8</p> <ul style="list-style-type: none"> • Low load prolonged stretching | <p style="text-align: center;">PRECAUTIONS</p> <ul style="list-style-type: none"> • Some surgeons prefer that their patients not receive rotator cuff specific strengthening with elastic resistance. If in doubt, check with the surgeon to clarify their preferences <p style="text-align: center;">EXERCISES</p> <p style="text-align: center;">Week 8</p> <ul style="list-style-type: none"> • Continue stretching and PROM as needed • Progress to full AROM without hiking • Dynamic stabilization exercises • Initiate PREs if pt is able to elevate arm without scapular hiking • Advance scapular exercises (rows, pull backs/down, punches, push up plus) • Proprioceptive/stability training | <p style="text-align: center;">PRECAUTIONS</p> <ul style="list-style-type: none"> • When performing advanced resistance training, may need to be performed every other day <p style="text-align: center;">EXERCISES</p> <p style="text-align: center;">Week 12</p> <ul style="list-style-type: none"> • Continue stretching, if motion is not full • Progress resistive exercise to tolerance (low weight, high rep) • High level proprioceptive, strength, and stabilization • Serratus anterior and mid-low trapezius specific scapular exercises <p style="text-align: center;">Week 18</p> <ul style="list-style-type: none"> • ER plyometrics <p style="text-align: center;">RETURN TO SPORT</p> <ul style="list-style-type: none"> • Overhead and serving sports: Weeks 21-22 • Contact sports and swimming: Week 26 |
| Criteria for Progression | Criteria for Progression | Criteria for Progression | |
| <p style="text-align: center;">PROM</p> <ul style="list-style-type: none"> • Flexion $\geq 125^\circ$ • ER in scap plane $\geq 75^\circ$ • IR in scap plane $\geq 75^\circ$ • ABD in scap plane $\geq 90^\circ$ | <ul style="list-style-type: none"> • Full AROM | <ul style="list-style-type: none"> • Tolerates progression to low-level functional activities • Demonstrates return of strength/dynamic shoulder stability • Demonstrates adequate strength/stability for progression to work/sport specific activities | |

