

Rotator Cuff Repair Post-Operative Physical Therapy Protocol

Phase I (0-6 weeks post-op)

GOALS:

- No active ROM of the shoulder girdle
- Remain in sling any time that you are up and moving around
- **6 weeks is the crucial healing period**

Home Exercise Program:

- Scapular elevation, depression, protraction, retraction (e.g. "scapular clocks")
- Pendulums with emphasis on "relaxed" shoulder and using trunk as prime moving force
- Elbow, wrist, hand motion with elbow at side
- Cryotherapy prn

Phase II (7-12 weeks post-op)

GOALS:

- Full ROM (<u>Target</u> to achieve full ROM by 12 weeks)
- Begin dry land active ROM without weight in biomechanically correct ROM only
- Discontinue sling

Physical Therapy Treatment:

- Glenohumeral and Scapulothoracic joint mobilizations
- PROM (<u>Target</u> to achieve full ROM by 12 weeks)
- Minimal manual resistance for isometric ER and IR and rhythmic stabilization (flexion, extension, Horizontal ab/adduction) at 45°-90°-120° elevation in the scapular plane as patient gains control of the upper extremity
- AAROM progressing to minimal manual resistance for PNF patterns
- Aquatic therapy -- Increase speed of movement for increased resistance as tolerated, progress to using hands as a "paddle" and then to webbed gloves for increased resistance as tolerated. Also add periscapular strengthening (i.e. wall push-ups, supine scapular retraction while floating)



- Begin dry land active ROM without weights. <u>Must be in good</u> <u>biomechanical ROM</u>. Add <u>light</u> resistance as patient gains control of movement with good biomechanics.
- Include these exercises:

• Elevation in the scapular plane (initially supine, progress to inclined, then upright)

- Prone rowing
- Serratus "punches" supine
- Sidelying ER
- Progress to IR on light pulleys or Theraband (after 6 weeks post-op only)

Home Exercise Program:

- As in Phase I, progress PROM as tolerated to full ROM
- All AROM exercises and isometrics. Again, emphasize proper biomechnaics

Phase III (13+ weeks post-op)

GOALS:

- Return to functional ativities
- Begin a strengthening program

Physical Therapy Treatment:

- G-H joint mobilizations and PROM when indicated
- Progress exercises in Phase II with increased weight based on 3 sets of 12-15 reps
- Gradually add the following exercises and progress weights:
 - Periscapular strengthening (wall push-ups, upright rowing, etc.)
 - ER, IR, and PNF patterns on pulleys
 - ER, IR, at 90° abduction
 - Begin functional progression for sports/activity-specific tasks
 - Begin isokenetics for ER, IR at 12 weeks post-op (Begin in modified abduction, progress to supine or sitting 90° abduction position)

Home exercise program:



- Maintain PROM
- Light Theraband exercise of ER, IR, Elevation, and "Full can" on non-PT days
- Progress to independent strengthening program prior to discharge