

ARTHROSCOPIC ROTATOR CUFF REPAIR REHABILITATION PROTOCOL

PHASE I (0 – 4 WEEKS)

Passive ROM only. Limit IR at 90 degrees to 40 degrees. Abduction Sling to be worn at all times except for hygiene and exercise. Codman's, Pendulum, Elbow/Wrist/Hand ROM grip strengthening, isometric scapular stabilization.

PHASE II (4 – 8 weeks)

4 – 6 weeks: Gentle passive stretch to 140 degrees of FF, 40 degrees of ER at side, and 60 – 80 degrees abduction. Increase IR gently at 90 degrees to 60 degrees. Begin gentle active assistive exercise, begin gently joint mobilizations, continue with Phase I exercises.

6 – 8 weeks: Increase ROM to tolerance. Remove Immobilizer at 6 weeks. Progress to active exercises with resistance, shoulder flexion to 45 degrees, begin deltoid and biceps strengthening. (If biceps tenodesis was concomitantly performed, no biceps strengthening until 8 weeks post operative date.)

PHASE III (8 – 12 weeks)

Progress to full motion without discomfort. Continue with scapular strengthening, progress exercises in phase II, begin IR/ER isometrics, stretch posterior capsule. No overhead lifting.

PHASE IV (12 weeks to 5 months)

Full ROM without without discomfort. Advance exercise in phase III, begin sport specific activities, maintain flexibility and motion.

If a distal clavicle excision is performed, then limit horizontal adduction for 8 weeks post operative date.

This is a general rehabilitation protocol. It may be modified and individualized.