



Massive Rotator Cuff Repair Rehab Protocol

Phase I - Immediate Post-Surgical Phase (Days 1-10)

Goals:

- Maintain integrity of the repair
- Gradually increase passive range of motion
- Diminish pain and inflammation
- Prevent muscular inhibition
- No strengthening until 3 months after surgery

Day 1-6

- Slight abduction brace
- Sleep in brace
- Elbow/hand gripping & ROM exercises
- Cryotherapy for Pain and Inflammation
 - 15-20 minutes/hour

Day 7-10

- Continue Brace
- Continue Brace for sleep
- Pendulum exercises 4-Sx/day (flexion, circles)
- Continue Cryotherapy

Precautions

- Maintain arm in brace - REMOVE ONLY FOR EXERCISE
- No lifting of objects
- No excessive or aggressive stretching or sudden movements
- No supporting of body weight by hands
- Keep incision clean and dry

Phase II - Protection Phase (Day 11-Week 6)

Goals

- Allow healing of soft tissues
- Do not overstress healing tissue
- Gradually restore full passive ROM (week 4-6)
- Re-establish dynamic shoulder stability
- Decrease pain and inflammation

Day 11-14

- Continue Brace
- Continue use of cryotherapy
- Continue all precautions

Week 4

- Continue brace - discontinue after week 6
- Active Assisted ROM Exercises
 - ER/IR in scapular plane (ER to neutral only if subscapularis repair - until week 6)
- Passive ROM
 - Flexion to tolerance - approximately 90 degrees
 - ER/IR in scapular plane (gentle ROM) (ER to neutral only if subscapularis repair - until week 6)
- Submaximal gentle Iso metrics
 - Flexion ER/IR
 - Elbow Flexors
- Continue use of ice as needed
- May use heat prior to ROM exercises

Week 5-6

- Discontinue brace at end of Week 6
- May use heat prior to exercises
- Progress Passive ROM to tolerance
 - Flexion to at least 90 degrees
 - ER/IR in scapular plane to 35 degrees
- Continue Elbow/hand gripping & ROM exercises
- Continue Submaximal Isometrics
 - Flexion with bent elbow
 - Extension with bent elbow

- ER/IR in scapular plane
- Elbow flexion
- Initiate AAROM flexion in supine (therapist supports arm)
 - If patient tolerates
- Continue all exercises from above
- Progress PROM until approx. Full ROM
- Initiate prone rowing to neutral are position
- Initiate isotonic elbow flexion
- Initiate active ROM exercises
 - Shoulder flexion in scapular plane
 - Shoulder abduction

Precautions

- No lifting
- No excessive behind the back movements
- No supporting of body weight by hands
- No sudden jerking motions

Phase III - Intermediate Phase (Week 7-14)

Goals

- Full active ROM (week 10-12)
- Maintain full PROM
- Dynamic Shoulder Stability
- Gradual Restoration of Shoulder strength & power
- Gradual return of functional activities

Week 7

- Continue stretching & PROM
- Continue dynamic stabilization drills
- PROM to tolerance
 - Flexion approx. 125 degrees
 - ER/IR at 45 degrees abduction to at least 45 degrees
- AAROM to tolerance
 - ER/IR in scapular plane
- Dynamic stabilization drills
 - Rhythmic stabilization drills
 - ER/IR in scapular plane

Week 8-10

- Continue all exercise listed above
- Progress to active full can isotonics
- May initiate light functional activities below shoulder height IF PHYSICIAN PERMITS

Week 12

- Begin isotonic strengthening exercise program
 - ER/IR tubing (lightest) at 0 degrees abduction
 - Side-lying ER (just AROM - no weights/resistance)
 - Prone rowing at 45 degrees of abduction
 - Prone horizontal abduction
 - Biceps curls
- Continue rhythmic stabilization exercises for ER/IR
 - At 45 degrees of abduction
- Initiate rhythmic stabilization for flex/ext
 - At 90 degrees of elevation (light resistance)

Week 14

- Continue all exercise listed above
- Progress independent home exercise program (fundamental shoulder exercises)

Phase IV - Advanced Strengthening Phase (Weeks 16-22)

Goals

- Maintain full non-painful ROM
- Enhance functional use of UE
- Improve muscular strength & power
- Gradual return to functional activities

Week 16-22

- Continue ROM & stretching to maintain full ROM
- Initiate light resistance training
- Progress shoulder strengthening exercises
 - Fundamental shoulder exercises
- Progress strengthening program
 - ER/IR tubing
 - ER side-lying
 - Full can in scapular plane (AROM only) *

- Prone rowing at 45 degrees abduction
- Elbow flexion
- Elbow extension

*patient must be able to elevate arm without shoulder or scapular hiking before initiating isotonic. If unable - continue with glenohumeral dynamic stabilization

Phase V - Return to Activity Phase (Weeks 23-30)

Goals

- Gradual return to strenuous work activities
- Gradual return to recreational sport activities

Week 23

- Continue fundamental shoulder exercise program (at least 4x/week)
- Continue stretching

Week 26

- May initiate interval sport program (i.e. golf)

These are general guidelines, which may be altered according to the judgment of the surgeon and physical therapist.