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POST-OPERATIVE ROTATOR CUFF REPAIR REHAB GUIDELINES

Diagnosis/	Surgery:
Patient wil	– twice per week for 8-12 wks I wear an abduction pillow brace/sling for 6 weeks postop after patient sees MD for 2 week post-op visit
	PULARIS REPAIR: no passive ER past 30° ENODESIS: no biceps strengthening until 8wks
	ed rehab for small (<2cm) cuff repair – sling for 4wks, AAROM at 3wks, AROM at 4wks, ing at 8wks if progressing phases well
PHASE 0: I	MMEDIATE POST-OP
	Protect repair Decrease swelling
Activity:	Sling at all times

- 2. Ice therapy
- 3. Active ROM of elbow, wrist, hand

PHASE 1: WEEKS 2-5

Goals:

- 1. Protect repair
- 2. Decrease pain
- 3. Prevent stiffness

Activity:

- 1. Sling at all times, may remove for therapy
- 2. Modalities to decrease pain and inflammation
- 3. Pain free PROM 90-120° forward flexion, 90° abduction
- 4. Isometrics of scapular muscles, posture
- 5. Rhythmic stabilization exercises
- 6. No active shoulder ROM, no overhead activities

PHASE 2: WEEKS 6-8

Goals:

- 1. Full PROM
- 2. Restore full AROM
- 3. Decrease pain

Activity:

- 1. Discontinue sling at week 6
- 2. Continue PROM as needed to restore full ROM
- 3. Initiate active assisted ROM and progress to full AROM as tolerated
- 4. Must be able to elevate arm without shoulder or scapular hiking before initialing isotonics if unable continue dynamic rhythmic stabilization glenohumeral exercises
- 5. Rhythmic stabilization
- 6. Progress to closed chain scapula stabilization
- 7. Gentle stretching
- 8. Home program for motion only
- 9. No lifting, no overhead, no theraband

PHASE 3: WEEKS 9-12

Goals:

- 1. Maintain flexibility
- 2. Improved shoulder stability
- 3. Restore shoulder strength

Activity:

- 1. Continue stretching
- 2. Continue strengthening scapular stabilizers, posture, dynamic stabilization
- 3. Avoid overly repetitive theraband exercises
- 4. Progress to pulleys and light weights
- 5. Increase weights as tolerated

PHASE 4: >3 MONTHS

Goals:

1. Enhance functional use of extremity

Activity:

1. Sport specific training or work hardening as necessary

Elisabeth C. Robinson, MD	Date