Postoperative Rehabilitation Rotator Cuff Repair
Large/Massive Tears (Delayed Protocol)

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Phase I: 0-4 Weeks

Goals:

1. Minimize postoperative pain and swelling.
2. Protect healing structures of rotator cuff.
3. Facilitate full passive range of motion.
4. Maintain muscle activity of rotator cuff/scapular stabilizers musculature.
5. Independent with Home Exercise Program.

Immobilization:

1. Patient to use sling for about 6 weeks, then gradually wean out as approved per MD.
   -sling is to be worn at all times except for hygiene and therapeutic exercise.

Precautions:

1. No AROM.
2. No excessive stretching, sudden movements or excessive motion behind back.
3. No supporting of body weight.

Modalities:

1. Cryotherapy.
2. Pain modification.

ROM:

1. **Home CPM** Flexion/Abduction and ER to tolerance.
   -to use 30 min/session 4x/day for 2-3 weeks.
2. Elbow, wrist and hand ROM to be full.
3. Any ROM limitations will be directed by MD (if other procedures were performed at the same time).
4. Passive ROM to be full by week 6, progression as tolerated or per individual surgical limitations.

Exercises:

1. Pendulums, elbow, wrist and hand motions including grip strengthening, Table Slides, and overhead pulleys for patient PROM.
2. Clinician directed PROM.

3. Joint mobilization as indicated (Grades I-II).
4. Begin scapular control exercises (start in sidelying).
5. PROM with L-bar/cane for IR/ER at 30-45 ABD at week 3-4.

Phase II: 4 Weeks – 8 Weeks

Goals:

1. Minimize postoperative pain and swelling.
2. Facilitate full passive range of motion.
3. Protect healing structures of rotator cuff.
4. Facilitate strength of rotator cuff/scapular stabilizers musculature.

Immobilization:

1. Patient to continue use of sling especially for prolonged or fatiguing activities as indicated. To wean out of sling at 6 weeks.

Modalities:

1. Cryotherapy.
2. Pain modification

ROM:

1. PROM expected to be full in all motions by week 6.
   -aggressively pursue any deficiencies
2. Begin active/assistive ROM exercises by week 6.

Exercises:

1. Overhead pulleys, canes and pendulum as indicated.
2. Clinician directed PROM.
3. Joint mobilizations as indicated (Grades I-III).
4. Begin submax isometrics with arm at neutral for RTC and deltoid at week 6-8.
5. Progress scapular stabilization program (sidelying to prone).
6. Begin Rhythmic Stabilization (from neutral then progressing ranges as tolerated).

Phase III: 8 Weeks – 4 Months

Goals:

1. Minimize postoperative pain.
2. Facilitate full passive and active range of motion.
3. Protect healing structures of rotator cuff.
4. Maximize strength of rotator cuff/scapular stabilizers.
5. Pursue independent function with upper extremity

Modalities:

1. Cryotherapy.
2. Pain modification as needed.

ROM:

1. PROM expected to be full-aggressively pursue any deficits.
2. Begin AROM for RTC with arm at side at week 8.
   -gradually working on active motions out of neutral being careful to avoid scapular substitution patterns.

Exercises:

1. Overhead pulleys, canes, other Active Assistive exercises as indicated.
2. Clinician directed PROM as needed.
3. Joint mobilizations as indicated (Grades III-IV).
4. Progress scapular active exercises in prone position.
5. Progress painfree multiangle isometrics of RTC/deltoid
6. Progressing to isotonic strengthening of RTC/deltoid
7. Progress active resistive exercises throughout-TOTAL ARM STRENGTHENING at 12 weeks
   a. Being sure to watch control and scapular substitution.
   b. Avoid overhead resistance until isokinetic strength goals are met.

Phase IV: 4+ Months

Goals:

1. Protect healing structures of rotator cuff.
2. Maximize strength of rotator cuff and scapular stabilizers muscles.
3. Return to pain free functional sport and/or work activities.

Exercises:

1. TAS progression, advancing resistance as tolerated.
2. Throwing program, overhead activities at 4 months if strength goals met.

Strength Testing (at 4 months):

1. Internal rotation/external rotation at 60° and 180°/sec - goals of 25-30% tq/BW internal rotation and 15-20% tq/BW external rotation.
   -continue testing monthly until desired goals met (as indicated per patient type).

Return to Sport:

1. Throwing and overhead activities when strength goals met and completion of functional progression.

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