

Small to Medium Rotator Cuff Repair Protocol

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Post-operative Day of Surgery Goal:

1. Control edema
2. Initiate elbow, wrist and hand and shoulder shrug exercises for early ROM
3. Use immobilizer all the time except for performing exercises, squeeze exercise ball as much as possible

Ultrasling: will be used for approximately 5 weeks per the surgeon's instruction. Okay to remove for treatment

PHASE I (Week 0-2)

Shoulder - Phase 1 home exercises

- Wrist, elbow and hand exercises
- Squeeze exercise ball as much as possible
- Begin addressing restrictions of the upper quarter
 - Cervical spine stretching: Upper Trapezius, Levator Scapulae, Scalenes
 - Thoracic Spine and costovertebral joint mobilizations
 - Scapular glides
 - Posture training
- Modalities for control of pain and inflammation
- Grad I-II joint mobilizations
- PROM Scapular Plane, ER and IR with shoulder abducted 45°
- Codman's Pendulum exercises

Maintain cardiovascular health using walking, exercise bike

PHASE Ia (Week 2-4)

Shoulder

- Modalities for control of pain and inflammation
- Grad I-II joint mobilizations
- **PROM supine scapular plane**
 - Codman pendulum exercises (AP direction, circular, progress to HA and HABD)
 - Table slides in the scapular plane
 - Shoulder Pulleys
 - *Normal scapulohumeral rhythm must exist to decrease impingement
 - Scapular mobilization
 - Dowel exercises
 - Flex: to tolerance 0 – 90 degrees
 - Abduction: 0 – 90 degrees
 - ER and IR
- Consider initiating pool where available

- **Extension and Horizontal Adduction: Avoid**

Scapula - AROM scapular shrugs, scapular retraction, scapular depression, PNF Diagonals

Elbow/Hand - AROM Flex/ext in neutral and hand strengthening

Maintain cardiovascular health using walking, exercise bike

Continue work on the upper quadrant to reduce restrictions to proper physiologic movement

PHASE Ib (Week 4-6)

Shoulder - Modalities for control of pain and inflammation
- Grad II-III joint mobilizations PA/Inferior, Adduction in neutral mild ER and IR

- **PROM continues with goal of full ROM**

- Continue shoulder pulleys, progress table slides and add wall slides as tolerated in scapular plane

*Normal Scapulohumeral Rhythm must exist to decrease impingement

- Continue dowel exercises

- Flex: to tolerance 0 – 120 degrees

- Abduction: maintain at 90 degrees until ER increases to 45 degrees then progress abduction to 120 degrees

- ER: 0 – 45 degrees at modified neutral. Slowly increase abduction position during ER/IR to 80 – 90 degrees by 4 weeks. No aggressive stretching.

- **Be VERY cautious with IR to avoid tension on the Infraspinatus if repaired.**

- **Ext and Horizontal Adduction: Avoid**

Scapula - AROM scapular shrugs, scapular retraction, scapular depression, PNF Diagonals

Elbow/hand

- Sub-max isometrics elbow flex/ext in neutral shoulder position

Maintain cardiovascular health: walking, exercise bike. Initiate LE and trunk exercises (no bouncing)

Continue work on the upper quadrant to reduce restrictions to proper physiologic movement

PHASE Ic (Week 6-8)

Shoulder - Modalities for control of pain and inflammation
- Grad II-III joint mobilizations

- **PROM (supine)**

- Initiate AROM exercises in scapular plane and IR and ER (**No Resistance**)

*Focus on quality uncompensated movement

- Continue pulleys

- UBE* (elbow below shoulder height with minimal reach and resistance)

- Flex: to tolerance 0 – 180 degrees or equal to uninvolved side

- Abduction: 150 – 180 degrees w/ deviation toward scapular plane
 - ER: 70 – 90 degrees; IR: 40 – 60 degrees
 - Ext: 30 degrees without stretching
 - Supine stabilization exercises for the scapular muscles
 - Initiate isometric exercises sub-maximal contraction (without pain)
- **Horizontal Adduction: Avoid**

Scapula - AROM scapular shrugs, scapular retraction, scapular depression

Elbow/Hand - Sub-maximal Isometric elbow flex/ext in neutral shoulder position
- Progress to gentle isotonic:
- 2-5 lb. BC curls and yellow Theraband Tricep pull-downs

Maintain cardiovascular health: walking, exercise bike. Progress LE and trunk exercises (no bouncing)
Continue work on the upper quadrant to reduce restrictions to proper physiologic movement

PHASE II (Week 8-10)

Shoulder - Modalities for control of pain and inflammation
- Grad II-III joint mobilizations
- Full ROM is allowed for PROM, AAROM, and AROM.
*Focus on proper technique and progress as tolerated.
- Initiation of isometric strengthening all planes.
*Contractions should not elicit symptoms
- No resistance UBE* (control shoulder flexion to below 75 degrees)
- Progress stabilization exercises to standing for the scapular muscles

Scapula - Peri-Scapular PRE's
- (Rhomboids, Middle/Lower Trapezius, Lats, Serratus Anterior etc.)

Elbow/Hand - Progress to 6 lb curls and increase resistance w/ triceps pull-downs

Maintain cardiovascular health: walking, exercise bike, Progress LE and trunk exercises (no bouncing)

PHASE III (Week 10 – 12)

- Modalities for control of pain and inflammation
- Grad II-III joint mobilizations
- Initiate light Rotator Cuff PRE's at 0 degrees abduction w/ Theraband and progress to moderate resistance
- Progression of standing stabilization exercises
- Progress Bicep/Tricep/Peri-Scapular strength/conditioning
- Add PNF movements D1 and D2 flexion/Extension AROM and progress to light T-band resistances

Maintain cardiovascular health using walking, exercise bike, consider light jogging LE and trunk exercises to be progressed

PHASE IV (Week 12-16)

- Modalities for control of pain and inflammation
- Grad II-III joint mobilizations
- Moderate Rotator Cuff PRE's at 30 degrees abduction w/ Theraband and progress to high resistance at 60 degrees abduction
- Progression of standing stabilization exercises
- Progress Bicep/Tricep/Peri-Scapular strength/conditioning
- Begin closed chain stability exercises
- Progress resistances of PNF patterned strengthening

Maintain cardiovascular health using walking, exercise bike, jogging, bleachers LE and trunk exercises to be progressed

PHASE V (Week 16-22)

- Modalities for control of pain and inflammation
- Grad II-III joint mobilizations
- High resistance Rotator Cuff PRE's at 90 degrees abduction w/ Theraband
- Begin plyometric exercises
- Progression of standing stabilization exercises
- Progress Bicep/Tricep/Peri-Scapular strength/conditioning
- Progress UBE/closed chain stability exercises
- Add gym exercises
- Initiate sport specific training/job related tasks/interval throwing program