



SCOTT
Orthopedics

Stanley S. Tao, M.D.

Scott Orthopedic Center

Total Sports Care

304-525-6905

Shoulder Rotator Cuff Repair

Operative Rehabilitative Protocol

The Physical therapy rehabilitation for rotator cuff repair will vary in length depending on the degree of instability, acute versus chronic conditions, strength/ROM status and activity demands.

Phase 1 (Initial 6 week post-surgery)

- Patient is immobilized for six weeks
- Immobilizer may be removed for gentle passive ROM (flexion, abduction and external rotation) and pendulum exercises
- Start elbow/wrist ROM and ball squeezes

Phase 2 (12 weeks post-surgery)

- Start active ASSIST and Active ROM
- Continue shoulder ROM exercises as needed
- Active shoulder flexion thought available ROM as tolerated

Phase 3 (3-6 months post-surgery) NO STRENGTHENING UNTIL 3 MONTHS!

- Should have full passive and active ROM
- Start isotonic exercises with emphasis on eccentric strengthening of the rotator cuff
- Active horizontal abduction (prone)
- Upper extremity proprioceptive neuromuscular facilitation may be added
- (Shoulder flexion/abduction/external rotation and extension/adduction/internal rotation diagonals emphasized)
- Add strengthening exercises to elbow and wrist
- Add upper body ergometer for endurance and gentle plyometrics
- Add advanced capsule stretches, as necessary
- Continue to progress isotonic exercises
- Add progressive plyometrics including stair stepper and tilt board

Phase 4 (6 months post-surgery)

- Continue strengthening program (spot specific positions)
- Continue total body conditioning program
- Skill master; begin practicing skills specific to activities
- May add progressive shoulder throwing program; advance through sequence as needed
- May perform isokinetic and endurance test if needed (Goal 80% or greater than opposite side)