

# **Rotator Cuff Repair Protocol**

## **Dr. Paul Matson**

## **Small/Medium Tears (1-5cm)**

## Phase I (Day 1 – 14 Post Op)

#### Goals:

- Maintain repair integrity.
- Gradually increase passive range of motion.
- Diminish pain and inflammation.

## Day One – Seven:

- Dressing change post operative day one.
- Sling use with abduction pillow for six weeks. May remove it to shower and when performing exercises. Sleep in sling.
- Pendulum exercises.
- Passive ROM.
  - o Flexion to tolerance.
  - o ER/IR in scapular plane.
- Good arm passive flexion in supine.
- Wand ER supine arm by side.
- Elbow/hand gripping and ROM exercises.
- Cryotherapy for pain/inflammation.
  - o Ice 15 minutes every two waking hours.

## Day 7 - 14:

- Continue exercises as above.
- Add seated pulley forward flexion five minutes in-clinic and three four times per day at home.
- Biodex passive flexion 15-20 minutes in-clinic until ROM is full over four weeks, ER once forward flexion is full.

#### Precautions:

- No lifting objects.
- No excessive shoulder extension.
- No shoulder movements or excessive stretching.
- No supporting body weight by hands.

#### Goals:

- Allow healing of soft tissue.
- Do not overstress tissue.
- Gradually restore full PROM (week four five).
- Decrease pain/inflammation.

## Phase II (Day 14 – Week 8 Post Op)

## Day 14 - 21:

- Continue passive range of motion program as above.
- Passive ROM to tolerance:
  - o Flexion 0-125/145 degrees.
  - o ER to at least 45 degrees.
  - o IR to at least 45 degrees.

## Week Three – Four:

- Continue exercises as above.
- Patient should exhibit near full PROM.
- Week four begin UBE forward mode only and Theraband internal rotation, extension to hip, adduction.

## Week Four – Six:

- AAROM with wand flexion, external rotation, internal rotation.
- UBE forward and reverse.
- ER with Theraband added to internal rotation, extension, adduction program.

## Week Six – Eight:

- Continue program as above.
- AROM exercises, external rotation, internal rotation, extension, adduction.
- Isotonic exercises:
  - o Supine flexion.
  - o T-band ER, IR, extension.
  - o SL ER.

- o Biceps curls.
- o Prone row.
- o Prone horizontal adduction.
- o Full can forward flexion in plane of scapulae.

## Goals:

- Full AROM (week 8-10).
  - o Gradual restoration of strength and power.
  - o Dynamic shoulder stability.

## Phase III (Weeks 8 – 14 Post Op)

- Continue ROM and stretching program.
  - o ER/IR tubing.
  - o ER side-lying.
  - o Prone row.
  - o Prone horizontal abduction.
  - o Prone extension.
  - o \*Lateral raise.
  - o \*Full can in scapular plane.
  - o Elbow flexion/extension.

Patient must be able to elevate arm without shoulder or scapular hiking before initiating isotonics; if unable, then continue glenohumeral exercises until able.

<sup>\*</sup>Start with weight of extremity adding weight as tolerated: 8 oz., 1 lb., 2 lbs.