

## MASSIVE ROTATOR CUFF/RE-REPAIR PROTOCOL

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### WEEKS 0 – 6

Patient to wear sling or abduction pillow continuously for 4-6 weeks. Sling may be removed for exercises, showering and dressing. OK to do tabletop activities within pain tolerance (eat, brush teeth, write and keyboarding).

PROM only to limits determined in operating room. If no limits listed on prescription, assume patient able to do full ROM.

PRECAUTIONS: Protect anterior deltoid and rotator cuff.

VISITS: 1 time per week (6 visits over 6 weeks).

- Pendulum (Codman) exercises.
- PROM ONLY
- NO PULLEYS UNTIL 6 WEEKS.
- AROM elbow, wrist and hand.
- Scapular stabilization exercises (to zero degrees extension)
- Postural awareness.
- Soft tissue mobilization as indicated.
- NO JOINT MOBILIZATION UNTIL 6 WEEKS POST OP.

\*\* SUBSCAPULARIS REPAIR PASSIVE ER TO 0 DEGREES, ABDUCTION TO 60 DEGREES, NO ACTIVE INTERNAL ROTATION THROUGH 6 WEEKS POST OP.

\*\* BICEP TENODESIS NO ACTIVE ELBOW FLEXION OR FOREARM SUPINATION UNTIL 4 WEEKS POST OP.

GOALS: flexion 140, abduction to 90

### WEEKS 6-10

PRECAUTIONS: Do not increase inflammation.

VISITS: 1-2 times per week.

- at 6 WEEKS begin AAROM with reciprocal pulleys , wand therapeutic ball to tolerance
- Scapular stabilization progression.
- Soft tissue mobilization as indicated

\*\* SUBSCAPULARIS REPAIR ER/IR TO 30 DEGREES UNTIL WEEK 8.

GOALS: good scapular control and positioning in preparation for AROM of the shoulder.

## WEEKS 10- 12

PRECAUTIONS: Do not increase inflammation or overwork cuff.

- Progress to AROM gravity assisted initially
- Progress to AROM no weight, weight of patient's arm is the resistance.
- Build endurance to patient tolerance.
- Progress scapular stabilization exercises.

GOALS: Full, painfree AROM by week 12.

CRITERIA TO PROGRESS TO ROTATOR CUFF STRENGTHENING: PAINFREE AROM.

## 3 MONTHS – 6 MONTHS

- Progress rotator cuff strengthening exercises as tolerated.
- Begin with closed chain isometrics for rotator cuff and progress to open chain strengthening with light free weights. Progression to the next weight level occurs at 2-3 weeks intervals. Patients should be instructed not to progress to the next level if there is any discomfort at the present level.
- Progress scapular strengthening both open and closed chain.
- Capsular stretching at end range as indicated for symmetrical ROM

GOALS: improve shoulder strength, power and endurance.  
Improve neuromuscular control and shoulder proprioception.  
Prepare for return to functional activities.

## Protocol Highlights

PROM ONLY 0-6 WEEKS

AAROM 6-10 WEEKS

AROM GRAVITY ASSISTED WEEK 10

AROM WEEK 11

STRENGTHENING OF ROTATOR CUFF AT WEEK 12 IF FULL PAINFREE AROM

This protocol provides the clinician with general guidelines for the rehabilitation of the patient undergoing arthroscopic, mini-open or open repair of a large or massive rotator cuff tear.

Questions regarding the progress of a specific patient are encouraged, and should be directed to Twin Cities Orthopedic Rehabilitation department at 952-442-8201 or to [rehabprotocols@tcomn.com](mailto:rehabprotocols@tcomn.com) .