

PT Protocol Massive Rotator Cuff Repair

PHASE I: PROTECTED ROM (8 WEEKS)

- Sling should be in place when not performing exercises.
- Hold pendulum exercises until 4 weeks following surgery
- May start active scapular mobility exercises at 4 weeks – Must keep the shoulder musculature relaxed.
- Avoid all active and active assistive exercises until cleared by the surgeon. This includes pulley exercises, wand and supine assisted exercises.
- Limited supine position passive ROM only.
 - 90 degrees of forward flexion weeks 0-2.
 - 30 degrees of external rotation.
 - 60 degrees of abduction without rotation.
 - May progress supine passive forward flexion to 10-15 degrees per week starting at week 2 as patient tolerates (goal 130-140° at 6 wks)
 - May progress passive abduction to 70-80 degrees at week 4 as pt tolerates.
- Initiate exercise program 3 times per day:
 - Immediate elbow, forearm and hand range of motion out of sling
 - **Note: If biceps tenodesis, no active elbow flexion or forearm supination until 4 wks postop**
 - Passive external rotation of the shoulder to tolerance - instruct family member
 - PROM into scapular plane elevation to 120 degrees

PHASE II: PROGRESSIVE ROM (8 TO 12 WEEKS)

- May discontinue sling after clearance by MD
- Coffee cup weightbearing
- Start AAROM and AROM – includes pulleys, wand and supine gravity assisted exercises. Emphasize all motions except IR behind the back until 3 months.
- Shoulder ROM goals:
 - 150 degrees of forward flexion – progress to 160-170 degrees.
 - 30 degrees of external rotation – progress to 60 degrees.
 - 60 degrees of abduction – progress to 90 degrees.
- Isolate and strengthen scapular stabilizers.
- Progress PROM and capsular stretching of the shoulder as needed – elevation and external rotation as tolerated
- Avoid resisted training or strengthening. Avoid AROM in positions of subacromial impingement.

PHASE III: (>12 WEEKS)

- Start progressive rotator cuff and shoulder strengthening at 3 months – isometrics initially
- Initiate isotonic strengthening at 4 months (Theraband, dumbbells, Hughston's exercises, etc). Include home cuff strengthening program. Continue to emphasize scapular stabilizers.
- Equate active and passive range of motion. Encourage scapulohumeral mechanics during active shoulder motion.
- Simulate work/recreational activities as rotator cuff strength and endurance improve.
- Strengthening/Activities:
 - @ 3 months
 - Advance as tolerated from isometrics → bands → light weights (1-5lbs) w/ 8-12 reps x 2-3 sets for cuff, deltoid, scapular stabilizers (*Only do this 3x/week to avoid cuff tendonitis*)
 - Begin eccentrically resisted motions, plyometrics (*weighted ball toss*), proprioception (*body blade*)
 - @ 4.5 months, begin sports-specific/job-specific rehab and advanced conditioning
- Throwing:
 - @ 6 months, if full-strength return to light tossing
 - @ 9 months, throw from the pitcher's mound and/or return to collision sports (hockey, football, etc.)
- Work:
 - Overhead work without lifting is usually possible @ 6 months
 - Can resume heavy labor once full-strength achieved (usually by 9-12 months)