

ARTHROSCOPIC ROTATOR CUFF REPAIR REHABILITATION PROTOCOL

		*Large to Massive Tears	
	RANGE OF MOTION	IMMOBILIZER	THERAPEUTIC EXERCISE***
PHASE I 0 - 6 weeks	0-2 weeks in sling	Sling with supporting	Codman's, elbow/wrist/hand ROM, grip strengthening, isometric scapular stabilization
	2-4 weeks pendulum only	abduction pillow to be worn	
	4-6 wks Passive range only - to tolerance - maintain elbow at or anterior to mid-axillary line while supine - limit internal rotation at 90 ° to 40° and behind back to T12	at all times except for hygiene and therapeutic exercise None	
PHASE II 6-10 weeks	6-8 weeks: Gentle passive stretch to 160 ° of forward flexion, 60 ° external rotation at side, and abduction to 60-80° - increase internal rotation gently at 90 ° to 60 ° and behind back to T7-T8		6-8 weeks: begin gentle active assistive/ active exercises, begin gentle joint mobilizations (grades I and II), continue with phase I exercises
	8-10 weeks: increase ROM to tolerance	None	8-10 weeks: begin active exercises begin deltoid and biceps* strengthening
PHASE III 10 - 12 weeks	Progress to full motion without discomfort		Continue with scapular strengthening, progress exercises in phase II, begin internal/external rotation isometrics, stretch posterior capsule when arm is warmed-up
		None	Advance exercises in phase III, begin sport-specific activities, maintain flexibility, increase velocity of motion, return to sports activities**
PHASE IV 12 weeks - 5 months	Full without discomfort		

*If biceps tenodesis is concomitantly performed, **NO** biceps strengthening until 6 weeks post-operative

**If approved by physician

*** For larger tears, active exercise will not be allowed for 6 weeks

NOTE: For mini-open or open repairs, same protocol is followed