

Rehab Protocol for Small (< 2 cm) Rotator Cuff Repair

Rehab Progression Summary

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0-2 weeks	Sling/immobilization
0-4 weeks	Passive ROM (Phase I)
3-6 weeks	Active-assisted ROM (Phase II)
4-8 weeks	Active ROM (Phase III)
8+ weeks	Strengthening (Phase IV)

Immobilization

- Sling/abduction pillow is worn for 2 weeks during the day and night
- Remove sling for light activity and home exercise program as indicated by therapist

Phase I - PROM: 1st post-op visit / 0-3 weeks

Goals for Treatment:

- Decrease pain and swelling
- Increase nutrition and healing response
- Infection prevention

PROM:

- Begin passive ROM exercises in clinic
- Pendulum exercise without weight: clockwise, counterclockwise, side-toside, front-back
- PROM: ER, IR, flexion, extension
- Table slides
- Therapist: grade I, II joint mobilizations
- Scapular retractions
- Wrist/elbow exercises; grip exercises

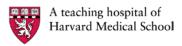
Patient Education:

- Wound inspection
- Begin active assisted ROM at 3 weeks
- No active motion for 4 weeks, all planes
- No weights/PRE for 8 weeks
- No active external rotation for 2 weeks
- Limit external rotation to neutral for 2 weeks
- Sling use as indicated by repair
- Icing 3x/day for 20 minutes

Other:

- Ice
- Modalities PRN





Phase II - Assisted-AROM: 3 weeks post-op

AROM:

- Pendulum exercises with light weight
- AAROM with cane & pulleys, to patient tolerance (flexion, abduction ER to neutral)
- Body Blade opposite hand, straight plane
- Shoulder shrugs light weight/high reps

Progress with:

- Wall climbing/finger ladder
- Scar mobility
- · Joint mobilizations grade I/II
- Quadruped rhythmic stabilization
- Body Blade opposite hand diagonals with trunk rotation
- Biceps curls
- Shoulder extension with Theraband
- Shoulder shrugs
- UBE active assist only

Other:

- Ice
- Modalities PRN

Phase III - AROM: 4 weeks post-op

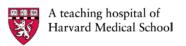
Progression dependent on quality of repair/tissue

AROM:

- Continue with Phase II A-AROM
- AAROM exercises with cane
- AROM all planes
- UBE forward/reverse
- Scapular retraction
- Prone extension
- Supine "holds" at 90° flexion; progress to small circles
- Side-lying "holds" at 90° abduction; progress to small circles
- Isometrics <50% effort, no pain (flexion, extension, abduction, ER)
- Biceps curls/triceps extensions with light resistances, elbow at side

Other:

- Ice
- Modalities PRN



Phase III - AROM: 6 weeks post-op

Progression dependent on quality of repair/tissue

Goal:

Should have full PROM

AROM:

- Continue with Phase III exercises, no weight
- Low-weight exercise (begin at 90° and increase to full ROM):
 - o flexion/extension
 - abduction
 - o rows
 - scaption
- Wall push-ups, wall push-ups plus
- Shoulder IR/ER with low resistance
- Scapular protraction ("serratus punch")
- Prone fly

Other:

- Ice
- Modalities PRN

Phase IV - Strength: 8 weeks post-op

Goal:

Should have full AROM, if not, begin passive stretch to achieve full ROM

Strength:

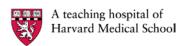
- Body Blade, involved extremity:
 - one-handed grip, abduction to 90°
 - two-handed grip, flexion to 90°
- Kneeling push-ups, kneeling push-ups plus
- Step-ups in kneeling push-up position
- UBE with increased resistance
- StairMaster in quadruped at level 12-15
- Treadmill in quadruped at 1.0 mph
- Plyoball:
 - o circles, CW & CCW, 1 minute each direction
 - squares, CW & CCW, 1 minute each direction

Other:

- Ice
- Modalities PRN







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Return to Sport-Specific Training: 12-16+ weeks post-op

- Continue with Phase IV Strength, increasing reps and resistance as tolerated
- Isokinetic testing as directed by physician
- Functional testing as directed by physician
- Push-ups, push-ups plus
- Step-ups in push-up position
- Sport-specific exercises as directed by physician and therapist

Other:

- Ice
- Modalities PRN

Courtesy of Vanderbilt Sports Medicine