ORTHOPEDICS & SPORTS MEDICINE
BAYCARE CLINIC

DR. JOHN AWOWALE
ROTATOR CUFF REPAIR POST-OP THERAPY PROTOCOL

Phase 1 – Protection & Initial ROM (0-6 weeks)

Goals for Phase 1	Precautions for Phase 1	Criteria for Progression to Phase 2
• Minimize pain and inflammation • Protect integrity of the repair • Initiate shoulder PROM • Prevent muscular inhibition	• Begin formal PT after 2-week physician visit unless instructed otherwise • Subscapularis repair: Limit shoulder ER PROM to 30° for 6 weeks post-op	• Full PROM • Flexion PROM > 125° • ER PROM in scapular plane to >75° (if uninvolved shoulder PROM >80°) • IR PROM in scapular plane to >75° (if uninvolved shoulder PROM >80°) • Abduction PROM to >90° in scapular plane

Brace
- Patient will wear an abduction pillow and sling for 6 weeks post-op

Initial Post-Op Exercises Days 0-14
- Gentle pendulum exercises 2-3x/day out of sling
- Elbow/hand gripping and ROM exercises 4-6x/day
- Cryotherapy as needed

PROM
- **Weeks 2-4**: Initiate PROM: Flexion/Abduction to 90°: ER/IR/Extension to 30°
- **Weeks 4-5**: PROM Flexion/Abduction to 120°: ER/Extension to 30°: IR to 45°
- **Weeks 5-6**: PROM progress as tolerated all directions

AAROM
- **Weeks 5-6**: Progress AAROM as able to regain full motion

AROM
- **Weeks 5-6**: Initiate AROM exercises. Don't raise arm through shoulder shrug sign.

Manual Therapy
- **Weeks 2-4**: May begin joint mobilizations grades I-II for pain control
- **Weeks 5-6**: Joint mobilizations grades II-III

Strengthening
- **Weeks 2-4**: Scapular and glenohumeral submax isometrics
- **Weeks 4-5**: Resistance band strengthening, scapular strengthening including prone rows, prone extension, prone horizontal abduction, etc.

Modalities
- Use of cryotherapy as needed for pain/swelling control
- **Weeks 4-5**: May use heat prior to ROM exercises

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Phase 2 – AROM & Scapular Strengthening Progression (6-14 weeks)

Goals for Phase 2	Precautions for Phase 2	Criteria for Progression to Phase 3
• Minimize pain and inflammation • Restore full shoulder PROM • Restore full shoulder AROM	• No residual pain should be present following exercises	• Full AROM and PROM • Pain free with all strengthening exercises • Dynamic shoulder stability

PROM
- Restore and maintain full shoulder PROM
- **Weeks 11-14**: Stretch posterior capsule with cross body adduction stretching

AAROM
- Continue as needed

AROM
- **Week 7**: Progress AROM without shoulder shrug sign

Manual Therapy
- **Week 7**: Joint mobilizations grades III-IV to address capsular adhesions

Strengthening
- **Week 7**: Rhythmic stabilization exercises (flexion at 45°, 90°, 100° & ER/IR at multiple angles)
- **Week 7**: Isotonic strengthening: flexion to 90°, scaption to 90°, bicep curls, triceps extension
- **Weeks 8-9**: Initiate light functional activities if physician permits in pain free ROM, starting at waist level activities progressing to shoulder level activities, then overhead activities
- **Week 10**: Progress to fundamental shoulder exercises, abduction to 90°, prone horizontal abduction, prone scaption
- **Week 10**: initiate isotonic resistance (0.5 kg weight) during flexion and abduction if patient exhibits nonpainful normal motion without substitution patterns
- **Weeks 11-14**: progress all exercises as able

Modalities
- Use of cryotherapy as needed for pain/swelling control

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Phase 3 – Shoulder Strengthening (14-24 weeks)

Goals for Phase 3	Precautions for Phase 3	Criteria to Progress to Phase 4
• Minimize pain and inflammation • Maintain full shoulder PROM and AROM • Improve shoulder, scapular, and total arm strength • Improve neurodynamic stabilization of the shoulder • No shoulder shrug sign with strengthening exercises	• None	• Maintenance of full pain-free ROM • Functional use of upper extremity • Full muscular strength and power

PROM/AROM
- **Weeks 14-20**: Continue ROM and stretching to maintain full ROM

Manual Therapy
- Continue joint mobilizations as needed

Strengthening
- **Weeks 15-20**: Progress strengthening as able
- **Examples**: Diagonals with resistance band in D2 patter, push up plus on wall (progress to floor), dynamic hug with band, IR at 90° with band, standing forward punch with band, ER with weight or band (supported & unsupported at 90°), bicep curls
- **Weeks 20-24**: Gradually increase resistance without shoulder shrug compensation

Flexibility
- **Weeks 14-20**: Self capsular stretches, sleeper stretch, behind the back IR with towel, cross body stretch, doorway ER stretch

Modalities
- Use of cryotherapy as needed for pain/swelling control

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Phase 4 – Return to Activity (24+ weeks)

Goals for Phase 4	Precautions for Phase 4
• Minimize pain and inflammation • Maintain full shoulder PROM and AROM • Restore shoulder, scapular and total arm strength, power and endurance • Restore neurodynamic stabilization of the shoulder • Safe and effective return to previous level of function for occupational, sport or desired activities	• None

Strengthening/Flexibility
- Continue fundamental shoulder exercise program (at least 4x/week
- Continue stretching if motion is tight

Modalities
- Use of cryotherapy as needed for pain/swelling control

Criteria for Return to Work, Function, Sport
- Minimal pain with phase 4 exercises
- Full, pain free shoulder PROM and AROM
- Shoulder, scapular, and total arm strength ≥ 90% of the uninvolved side
- (4+/5)

Work Related Activities
- Progress back to work related activities

Sport Related Activities
- Progress back to sport related activities

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