



SANTOSH JACOB
MBBS, MS, FRACS, FAOA
Orthopaedic Surgeon

East Coast Orthopaedics

Arthroscopic rotator cuff repair rehabilitation programme

0 – 6 weeks after surgery

- Wear sling when walking or travelling,
- **Otherwise remove sling with arm supported on a chair, table or pillow and use hand the hand can be used for eating, computer and paperwork etc**
- Don't move the shoulder too much.
- 3 times a day, wrist and hand exercises with a squeeze ball, but the arm must be kept internally rotated during these exercises.
- Physiotherapy to teach isometric muscle contraction of deltoid and scapular stabilizers, elbow and hand movement.

6 – 12 weeks after surgery

- No more sling, except if in a rowdy crowd situation.
- Begin passive motion 0-90° forward flexion supine, and external rotation to neutral, no internal rotation beyond resting against the tummy

No abduction for 4 months until all other movements are full as premature abduction while the shoulder is stiff including abnormal scapulo-thoracic rhythm can result in impingement

12 – 16 weeks after surgery

- Continue stretching of the shoulder
- Begin formal strengthening internal/external rotation, retraining of scapulo-thoracic rhythm and proprioception.
- Patient may walk / jog and swimming (breaststroke only)

16 – 24 weeks after surgery

- obtain full range of motion slowly over 24 weeks
- sports specific strength and endurance training (tennis overhead serve, freestyle swimming, surfing) when fully rehabilitated with respect to motion, strength & proprioception. This usually does not occur until 6 months , 9 months for throwing.