

Rotator Cuff Repair Protocol

NOTES / VARIATIONS			
Biceps Tenodesis	<ul style="list-style-type: none"> Phases I and II: elbow PROM and AAROM only Phase III: progress to elbow AROM Phase IV: may begin strengthening 		
Subscapularis Repair	<ul style="list-style-type: none"> Phase I: 0° ER Phase II: 0-20° ER 		
	Phase I: Weeks 1-4	Phase II: Weeks 4-6	Phase III: weeks 7-12
Weight-Bearing and Immobilization	<ul style="list-style-type: none"> Sling with abduction pillow at all times except for dressing, hygiene, or during PT exercises Non-weight-bearing 		<ul style="list-style-type: none"> Wean from and discontinue sling WBAT May begin non-repetitive non-resistive ADLs at chest level and below
Aerobic	<ul style="list-style-type: none"> None 	<ul style="list-style-type: none"> None 	<ul style="list-style-type: none"> May begin stationary bike
Range of Motion (ROM)	<ul style="list-style-type: none"> Pendulum exercises Table slides Full AROM of the cervical spine, hand, wrist, and elbow, (unless biceps tenodesis - see above) Shoulder PROM (no AAROM or AROM) <ul style="list-style-type: none"> supine PROM only elevation to 90° in scapular plane ER to 20° 	<ul style="list-style-type: none"> Continue Phase I exercises Shoulder PROM (no AAROM or AROM) <ul style="list-style-type: none"> supine PROM only elevation to 120° in scapular plane and progress as tolerated abduction 60-80° without rotation ER to 40° IR to 30° 	<ul style="list-style-type: none"> Continue Phase II exercises Shoulder ROM <ul style="list-style-type: none"> progress to AAROM when PROM goals met and minimal pain <ul style="list-style-type: none"> start AAROM supine and progress to upright wand/pulley exercises for elevation, ER, and IR advance elevation, abduction, ER, and IR as tolerated posterior capsular stretching
Strengthening	<ul style="list-style-type: none"> No shoulder resistance exercises 	<ul style="list-style-type: none"> No shoulder resistance exercises 	<ul style="list-style-type: none"> No shoulder resistance exercises Strengthening <ul style="list-style-type: none"> may begin when minimal to no pain, ROM goals achieved without compensation, and good scapular control with varied postures and movements rotator cuff isometrics at 0° abduction and neutral rotation periscapular stabilization core and trunk exercises passive resistance exercises for large muscle group (pecs, lats, etc.)
Goals	<ul style="list-style-type: none"> Pain control Protect tissue healing Minimize joint stiffness 	<ul style="list-style-type: none"> Pain control Protect tissue healing Minimize joint stiffness Progress ROM 	<ul style="list-style-type: none"> Advance to full ROM Initiate isometric strengthening

	Phase IV: Weeks 13-20	Phase V: Weeks 20+
Weight-Bearing and Immobilization	<ul style="list-style-type: none"> • WBAT 	
Aerobic	<ul style="list-style-type: none"> • May begin elliptical machine • May begin walk-jog-run-progression 	<ul style="list-style-type: none"> • As tolerated (other than sport-specific restrictions noted below)
Range of Motion (ROM)	<ul style="list-style-type: none"> • Continue Phase III exercises • Advance to full AROM if not already achieved • Continue active and passive stretching at terminal motions as needed 	
Strengthening	<ul style="list-style-type: none"> • Continue Phase III exercises • Progressive from isometrics to light bands to light weights (1-5 lbs) for rotator cuff and periscapular isotonic exercises <ul style="list-style-type: none"> ▸ avoid lifting >15-20 lbs • Begin elbow strengthening (if biceps tenodesis) • Begin eccentrically resisted motion • Begin plyometrics (eg. weighted ball toss) • Begin proprioception (eg. Bodyblade) 	<ul style="list-style-type: none"> • Continue Phase IV exercises • May begin individualized sport-specific programs including advanced conditioning when full and pain-free ROM, 5/5 strength, excellent shoulder girdle mechanics/stability, and met goals of prior phases <ul style="list-style-type: none"> ▸ May begin light sports such as golf (chipping, putting) and tennis (easy ground strokes) ▸ May advance these sports at 6 months ▸ Overhead/throwing athletes may begin throwing program at 6 months ▸ May return to contact/collision sports at 9 months ▸ Maximum recovery may take 9-12 months
Goals	<ul style="list-style-type: none"> • Advance strengthening exercises • Begin plyometric and proprioception exercises 	<ul style="list-style-type: none"> • Begin individualized sport-specific training