



Dx: Right Left

Patient Name: _____

Date of Surgery: _____

PT/OT: Evaluate and treat. Follow the following protocol.

Signature/Date: _____

RTC Repair (Massive) +/- Acromioplasty/Mumford

Phase I: 0 to 3 weeks after surgery

Goals:

1. Protect the rotator cuff repair
2. Ensure wound healing

Activities:

1. Sling: Use your sling all of the time.
2. Use of the affected arm: DO NOT raise your arm away from your body. It is OK for you to flex/extend your arm at the elbow and wrist ONLY.

Also:

- *No Lifting of Objects
- *No Excessive Shoulder Extension
- *No Excessive Stretching or Sudden Movements
- *No Supporting of Body Weight by Hands
- *No Strengthening until 12 weeks postop**

3. Showering

You may shower and wash the incision area. To wash under the affected arm, bend over at the waist and let the arm passively come away from the body. It is safe to wash under the arm in this position.

Exercise Program:

ICE:

Days per Week: 7

Times per Day: 4-5 x per day for 20 minutes. Protect skin with a T-shirt or cloth.

Criteria for Progression to Phase II: 3 weeks of tendon healing

Phase II: 3 to 8 weeks after surgery

Goals:

1. Protect the rotator cuff repair
2. Regain full **passive** range of motion of the shoulder

Activities

1. Sling: **Sling at all times for 8 weeks.**
2. Use of the operated arm: **NO** lifting your arm away from your body, since this is the action of the tendon that was repaired.
3. Bathing and showering: Continue to follow the instructions from phase one and the instructions above.

Exercise Program:

The exercises listed below may be gradually integrated into the rehabilitation program under the supervision of your doctor and/or physical therapist.

STRETCHING

Days per week: 5-7

Times per day: 1-3

Stretching

Scapular retraction exercises

Pendulum exercises

Supine Passive External Rotation

Standing Passive External Rotation

Supine passive arm elevation

Behind the back internal rotation

Supine Passive external Rotation with Abduction

Passive External rotation @ 90° abduction

Supine Cross-Chest Stretch

Wall slide Stretch

Progress passive range of motion in all planes.

Gentle scapular/glenohumeral joint mobilization to regain full

Criteria for Progression to Phase III: Full PROM on the repaired side with minimal signs of scapular dyskinesis and minimal to no pain. 8 weeks of tendon healing.

Phase III: 8-12 weeks after surgery

Goals:

1. Protect the rotator cuff repair
2. Regain full active range of motion

Activities:

Use of the operated arm: You may now safely use the arm for normal daily activities involved with dressing, bathing and self-care. You may raise the arm away from the body; however, you should not raise the arm when carrying objects greater than one pound. Any forceful pushing or pulling activities could disrupt the healing of your surgical repair.

***No Strengthening until 12 weeks postop**

Exercise Program

The exercises below form a list that may be gradually integrated into the rehabilitation program under the supervision of your doctor and/or physical therapist.

STRETCHING / ACTIVE MOTION

Days per week: 3

Times per day: 1

Stretching

Pendulum exercises

Supine external Rotation

Standing external Rotation

Supine passive arm elevation

Behind the back internal rotation

Hands-behind-the-head stretch

Supine cross-chest stretch

Sidelying internal rotation stretch
External rotation at 90° abduction stretch
Wall slide Stretch

Active Assist range of motion progressed to active range of motion in all planes:

Side-lying External Rotation
Prone Horizontal Arm Raises “T”
Prone scaption “Y”
Prone extension
Standing forward flexion (scaption)
Sidelying internal rotation stretch
Prone row
Scapulohumeral rhythm exercises
Proprioception drills

Criteria for Progression to Phase IV: Patient is able to perform active motions at multiple angles with minimal signs of scapular dyskineses. Minimal to no post operative pain.

Phase IV: 12 to 20 weeks after surgery

Goals:

1. Continue to protect the repair by avoiding excessive forceful use of the arm or lifting excessively heavy weights.
2. Restore full shoulder motion
3. Restore full shoulder strength
4. Gradually begin to return to normal activity

Activities:

1. Sports that involve throwing and the use of the arm in the overhead position are the most demanding on the rotator cuff. Your doctor and sports physical therapist will provide you with specific instructions on how and when to return to golf, tennis, and volleyball, swimming and throwing.
2. For people who wish to return to training with weights, you're your doctor will give you guidelines regarding the timing and advice when returning to a weight-training program.
3. The following timetable can be considered as a minimum for return to most activities:

Ski: 6 months
Golf: 6 months
Weight Training: 6 months
Tennis: 6 -8 months
Swimming: 6-8 months
Throwing: 6 months

Before returning safely to your activity, you must have full range of motion, full strength and no swelling or pain. Your doctor or physical therapist will provide you with a specific interval-training program to follow when it is time to return the above activities.

STRETCHING / ACTIVE MOTION / STRENGTHENING

Days per week: 3
Times per day: 1

Stretching

Behind the back internal rotation
Standing External Rotation / Doorway
Wall slide Stretch
Hands-behind-head stretch
Supine Cross-Chest Stretch

Sidelying internal rotation (sleeper stretch)
External rotation at 90° Abduction stretch

Theraband Strengthening

External Rotation

Internal Rotation

Standing Forward Punch

Shoulder Shrug

Dynamic hug

Optional for Overhead Sports:

External rotation at 90°

Internal rotation at 90°

Standing 'T's

Diagonal up

Diagonal down

Dynamic Strengthening

It is recommended that these exercises be started at 1lb and do not exceed 5lb.

Side-lying External Rotation

Prone Horizontal Arm Raises "T"

Prone scaption "Y"

Prone row

Prone extension

Standing Forward Flexion

Standing forward flexion "full-can" exercise

Prone external rotation at 90° abduction "U's

Push-up progression