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## **ACCELERATED ROTATOR CUFF REPAIR REHABILITATION PROTOCOL**

**PATIENT NAME:**

**DATE OF SURGERY:**

**BODY PART/SIDE:**

**IMPORTANT ITEMS:**

- 1 Patient **MUST** regain **FULL PASSIVE** forward elevation by **4 WEEKS POST-OP**  
**NO** isolated biceps activation for **8 WEEKS POST-OP** if arthroscopic biceps tenodesis was also performed
- 2 performed
- 3 **NO** strengthening until **8 WEEKS POST-OP**
- 4 **SLING** to be worn at all times *[including when sleeping]* for **4 WEEKS POST-OP**; Can be removed for hygiene and exercises **ONLY**

### **PHASE I PRECAUTIONS**

- NO** lifting or carrying of objects
- DO NOT** actively raise arm or elbow away from body

<b>PHASE I [0-2 WEEKS]</b>	
<b>ROM</b>	<b>STRENGTH</b>
Initiate pendulums	Posterior capsule mobilizations
PROM elbow, wrist, & hand	
Begin <b><u>SUPINE</u></b> shoulder PROM [ <b><u>limit 140° FE, 40° ER</u></b> ]	Scapular retractions
<b><u>AVOID</u></b> excessive stretching [including anterior capsule and extension]	Scapular clock exercises
<b><u>AVOID</u></b> supporting of body weight by hands	

### **GOALS TO PROGRESS TO PHASE II**

- Pain and inflammation controlled
- Ensure wound healing
- Protect Repair

### **PHASE II PRECAUTIONS**

- Continue Phase I Precautions*

<b>PHASE II [2-4 WEEKS]</b>	
<b>ROM</b>	<b>STRENGTH</b>
Continue phase I ROM	Continue phase I exercises
Initiate shoulder PROM in abduction	Progress scapular and glenohumeral joint mobilizations
Begin shoulder IR & pectoralis minor flexibility	Begin seated wand exercises
	Initiate isotonic scapular retraction/protraction

Begin shoulder IN & pectoralis minor flexibility	Manual resisted scapular stabilization
	Begin submaximal isometric exercises

**GOALS TO PROGRESS TO PHASE III**

- FULL PASSIVE FORWARD ELEVATION** by **4 WEEKS POST-OP**
- Normalized posture
- Discontinue sling at **4 WEEKS POST-OP**

<b>PHASE III [4-6 WEEKS]</b>	
<b>ROM</b>	<b>STRENGTH</b>
Progress shoulder PROM in all planes	Continue phase II exercises
Begin AAROM exercises in all planes	Begin UBE with light resistance [ <b>90-100 RPM</b> ]
	Begin closed-chain UE activities
	Initiate proprioception exercises
	UE swiss ball mobility [IR/ER]

**GOALS TO PROGRESS TO PHASE IV**

- FULL AAROM** in all planes
- Independent dressing ADL's

<b>PHASE IV [6-8 WEEKS]</b>	
<b>ROM</b>	<b>STRENGTH</b>
Maintain FULL PASSIVE ROM	Begin prone exercise program
Progress AAROM exercises from phase III	Begin supine rhythmic stabilization
Initiate AROM in all planes	Begin light TheraBand exercises
Diagonal patterns	Increase UBE to moderate resistance [ <b>75-85 RPM</b> ]

**GOALS TO PROGRESS TO PHASE V**

- FULL ACTIVE ROM** in all planes
- Pain-free return to ADL's

<b>PHASE V [8-10 WEEKS]</b>	
<b>ROM</b>	<b>STRENGTH</b>
Continue stretching progression [ <b>no limits</b> ]	Advance phase IV exercises
	Begin progressive dumbbell program [ <b>emphasis on low weight/high rep</b> ]
	Progress closed-chain UE strength [ <b>push up with a plus, swiss ball activities</b> ]
	Begin short toss and overhead endurance activities per Physician release

**GOALS TO PROGRESS TO PHASE VI**

- Full, painless ROM in all planes

<b>PHASE VI [10-16 WEEKS]</b>	
<b>ROM</b>	<b>STRENGTH</b>
Full, unrestricted ROM in all planes	Advance phase V exercises
	Progress TheraBand strengthening [include diagonal
	Begin prone exercise program <b>with dumbbells</b> [row,

extension, "T" & "Y" exercises]

Begin functional eccentric strengthening

**GOALS TO PROGRESS TO PHASE VII**

- Full, painless ROM in all planes
- 5/5 rotator cuff strength
- 65-70% IR/ER isokinetic testing

**PHASE VII [16+ WEEKS]**

<b>ROM</b>	<b>STRENGTH</b>
Full, unrestricted ROM in all planes	Continue functional strengthening progression
Stretching program with emphasis on posterior capsule	Progress endurance activities
	Reinforce scapular stabilization and home exercise program maintenance

**RETURN TO SPORT CRITERIA**

- Requires clearance from **SURGEON**
- FULL, PAINFREE** shoulder function **WITHOUT** signs of instability
- Sport-specific training/practice once shoulder is at 90% of uninvolved side
- NO** throwing or overhead athletic moves until **4 MONTHS POST-OP**
- FULL** return to contact sports **ANTICIPATED** at **6-8 MONTHS**