

# Rotator Cuff Repair Protocol

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

	<b>Phase IV: Weeks 13-20</b>	<b>Phase V: Weeks 20+</b>
Weight-Bearing and Immobilization	<ul style="list-style-type: none"> <li>• WBAT</li> </ul>	
Aerobic	<ul style="list-style-type: none"> <li>• May begin elliptical machine</li> <li>• May begin walk-jog-run-progression</li> </ul>	<ul style="list-style-type: none"> <li>• As tolerated (other than sport-specific restrictions noted below)</li> </ul>
Range of Motion (ROM)	<ul style="list-style-type: none"> <li>• Continue Phase III exercises</li> <li>• Advance to full AROM if not already achieved</li> <li>• Continue active and passive stretching at terminal motions as needed</li> </ul>	
Strengthening	<ul style="list-style-type: none"> <li>• Continue Phase III exercises</li> <li>• 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"> <li>▸ avoid lifting &gt;15-20 lbs</li> </ul> </li> <li>• Begin elbow strengthening (if biceps tenodesis)</li> <li>• Begin eccentrically resisted motion</li> <li>• Begin plyometrics (eg. weighted ball toss)</li> <li>• Begin proprioception (eg. Bodyblade)</li> </ul>	<ul style="list-style-type: none"> <li>• Continue Phase IV exercises</li> <li>• 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"> <li>▸ May begin light sports such as golf (chipping, putting) and tennis (easy ground strokes)</li> <li>▸ May advance these sports at 6 months</li> <li>▸ Overhead/throwing athletes may begin throwing program at 6 months</li> <li>▸ May return to contact/collision sports at 9 months</li> <li>▸ Maximum recovery may take 9-12 months</li> </ul> </li> </ul>
Goals	<ul style="list-style-type: none"> <li>• Advance strengthening exercises</li> <li>• Begin plyometric and proprioception exercises</li> </ul>	<ul style="list-style-type: none"> <li>• Begin individualized sport-specific training</li> </ul>