Corey Kendall, MD 7950 Ortho Ln. Brownsburg, IN 46112 [P] 317.268.3634 • [F] 317.268.3695

Arthroscopic Rotator Cuff Repair Physical Therapy Protocol Small Tears (One Anchor)

Phase I: Immediate Post-operative (Days 1 to 10)

Goals

- Maintain integrity of the repair
- Gradually increase passive range of motion
- Diminish pain and inflammation
- Prevent muscular inhibition

Days 1 to 6

Brace

- Ultrasling with abduction pillow
- Sleep in sling or brace

Exercises

- Pendulum exercises four to eight times daily (flexion, circles)
- Active assisted range of motion exercise
 - Wand external rotation/internal rotation in scapular plane
- Passive range of motion
 - Flexion to tolerance
 - External rotation/internal rotation in scapular plane
- Elbow/hand gripping and range of motion exercises
- Submaximal and pain-free isometrics
 - Flexion
 - Abduction
 - External rotation
 - Internal rotation
 - Extension
- Cryotherapy with elevation for pain and inflammation every hour for 20 minutes

Days 7 to 10

Brace

- Continue ultrasling
- Continue sleeping in sling until Dr. Kendall instructs (usually days 7 to 10)

Functional Activities

- No lifting of objects
- No excessive shoulder motion behind back
- No excessive stretching or sudden movements
- No supporting of body weight by hands
- Keep incision clean and dry

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Exercises

- Continue pendulum exercises
- Progress passive range of motion to tolerance
 - Flexion to at least 115 degrees
 - External rotation in scapular plane to 45 to 55 degrees
 - Internal rotation in scapular plane to 45 to 55 degrees
- Active assisted range of motion exercises (wand)
 - External rotation/internal rotation in scapular plane
 - Pulleys for flexion and scaption
 - Flexion to tolerance*
 - *Therapist provides assistance by supporting arm
- Continue elbow/hand range of motion and gripping exercises
- Continue isometrics
- May initiate external rotation/internal rotation tubing at 0 degrees abduction, if patient exhibits necessary active range of motion
- Continue cryotherapy for pain management

Phase II: Protection (Day 11 to Week 5)

Goals

- Allow healing of soft tissue
- Do **not** overstress healing tissue
- Gradually restore full passive range of motion (weeks two to three)
- Re-establish dynamic shoulder stability
- Decrease pain and inflammation

Days 11 to 14

Brace

• Ultrasling converted to regular sling by Dr. Kendall

Exercises

- Passive range of motion to tolerance
 - Flexion: 0 to 145 to 160 degrees
 - External rotation: 90 degrees abduction to at least 75 to 80 degrees
 - Internal rotation: 90 degrees abduction to at least 55 to 60 degrees
- Active assisted range of motion to tolerance
 - Flexion
 - External rotation/internal rotation in scapular plane
 - External rotation/internal rotation at 90 degrees abduction
- Dynamic stabilization drills
 - Rhythmic stabilization drills
 - External rotation/internal rotation in scapular plane
 - Flexion/extension at 100 degrees flexion
- Continue isotonic external rotation/internal rotation with tubing
- Initiate active exercise prone rowing and elbow flexion
- Initiate active exercise flexion and abduction at day 15
- Continue cryotherapy for pain management

Weeks 3 to 4

Brace

• Sling may be used for comfort

Exercises

- Patient should exhibit full passive range of motion, nearing full active range of motion
- Continue all exercises listed above
- Pulleys for internal rotation/towel internal rotation stretch
- Initiate scapular muscular strengthening program
- Initiate sidelying external rotation strengthening (light dumbbell)
- Initiate isotonic elbow flexion
- May use pool for light range of motion exercises
- Continue cryotherapy for pain management

Week 5

Functional Activities

- No heavy lifting of objects
- No supporting of body weight by hands and arms
- No sudden jerking motions

Exercises

- Initiate internal rotation behind back
- Begin sleeper stretch
- Patient should exhibit full active range of motion
- Continue active assistive range of motion and stretching exercises
- Progress isotonic strengthening exercise program
 - External rotation tubing
 - Sidelying external rotation
 - Prone rowing
 - Prone horizontal abduction
 - Shoulder flexion (scapular plane)
 - Shoulder abduction
 - Biceps curls

Phase III: Intermediate (Weeks 6 to 12)

Goals

- Gradual restoration of shoulder strength and power
- Gradual return to functional activities

Week 6

Functional Activities

• If Dr. Kendall permits, may initiate **light** functional activities

Exercises

- Continue stretching and passive range of motion (as needed to maintain full range of motion)
- Continue dynamic stabilization drills
- Progress isotonic strengthening program
 - External rotation/internal rotation tubing
 - External rotation sidelying
 - Lateral raises
 - Full can in scapular plane
 - Prone rowing
 - Prone horizontal abduction
 - Prone extension
 - Elbow flexion
 - Elbow extension

Weeks 8 to 10

Exercises

- Continue all exercise listed above
- Progress isotonic strengthening program
 - Empty can raises
 - Overhead shoulder press (begin without weight)
- Progress to independent home exercise program (fundamental shoulder exercises)
- Initiate interval golf program (slow rate of progression)

Phase IV: Advanced Strengthening (Weeks 12 to 20)

Goals

- Maintain full non-painful active range of motion
- Enhance functional use of upper extremity
- Improve muscular strengthen and power
- Gradual return to functional activities

Week 12

Exercises

- Continue range of motion and stretching to maintain full range of motion
- Self-capsular stretches
- Progress shoulder strengthening exercises
- Fundamental shoulder exercises
- Initiate swimming or tennis program (if appropriate)

Week 15

Exercises

- Continue all exercises listed above
- Progress golf program to playing golf (if appropriate)

Phase V: Return to Activity (Weeks 20 to 26)

Goals

- Gradual return to strenuous work activities
- Gradual return to recreational sport activities

Week 20

Exercises

- Continue fundamental shoulder exercise program (at least four times weekly)
- Continue stretching, if motion is tight
- Continue progression to sport participation