

## **REHABILITATION PROTOCOL FOR SMALL ROTATOR CUFF REPAIR**

### **APPOINTMENTS:**

- Clinic appointments at 8 to 12 days, then at 6 weeks, 12 weeks, 18 weeks and possibly 24 weeks post-op
- Physical therapy appointment starting at 2 weeks, lasting 12 to 18 weeks

### **ACUTE PHASE: Surgery to 2 weeks post-op**

- Immobilize the shoulder in the abduction sling
- Remove sling 5 times a day to work on range of motion exercises for the hand, wrist, and elbow and work on shoulder shrugs and pendulum exercises
- Ice as needed
- Work restrictions: off work for 5 days or until pain controlled by non-narcotic pain medications and then may return to work with no use of the operative arm which must remain in the sling

### **PHASE I: 2 to 4 weeks post-op**

- Gradually wean out of the sling during the day but continue wearing it at night for 6 weeks
- Begin use of the operative arm for activities of daily living, but no lifting
- Continue pendulum exercises
- Begin physical therapy and continue exercises at home daily:
  - Pulley for passive flexion and abduction to 90 degrees
  - Table slides for passive flexion and abduction
  - Passive ROM with cane for flexion/extension, adduction, and internal rotation/external rotation
  - Towel stretch for internal rotation
  - Isometric strengthening
  - Modalities as needed: heat, ice, ultrasound, e-stim
  - NO ACTIVE ABDUCTION
- Work restrictions: no use of the operative arm

### **PHASE II: 4 to 6 weeks post-op**

- Continue use of the arm for activities of daily lifting, but no lifting
- Continue pendulum exercises
- Continue physical therapy and home exercises:
  - Continue pulley for passive flexion and abduction; progress to 180 degrees
  - Begin supine AAROM with therapist for flexion/extension, abduction/adduction, internal rotation/external rotation at 0 degrees abduction
  - Begin passive resistive exercises for flexion/extension, abduction/adduction, internal rotation/external rotation at 0 degrees abduction using therabands
  - Standing supraspinatus exercise to 90 degrees with gravity resistance only
  - PNF diagonals below 90 degrees, light resistance theraband
  - Light closed chain and scapular exercises
  - Goal of FROM at end of phase II
- Work restrictions: no use of the operative arm

**PHASE III: 6 to 12 weeks post-op**

- No lifting greater than 5 pounds
- Continue physical therapy and home exercises:
  - Continue P/AA/AROM stretches
  - Continue pulley for passive flexion and abduction to 180 degrees
  - Begin supraspinatus passive resistive exercises
  - Progress internal rotation/external rotation passive resistive exercises to 90 degrees abduction
  - Weight training for biceps, triceps
- Work restrictions:
  - Limited overhead use and limited strenuous or repetitive use of the operative arm
  - No lifting, pushing, or pulling greater than 5 pounds

**PHASE IV: 12 to 24 weeks post-op**

- No lifting, pushing, or pulling greater than 15 pounds until 18 weeks post-op and then no lifting greater than 25 pounds until 6 months post-op
- Continue physical therapy, transitioning to home exercise program if able
  - Passive resistive exercises including isolated supraspinatus strengthening and prone external rotation at 90 degrees
  - Global strengthening
  - Begin work-related or sports-specific conditioning
  - Progress to work hardening/functional capacity evaluation if appropriate
- Work restrictions:
  - No lifting, pushing, or pulling greater than 15 pounds until 18 weeks post-op and then no lifting greater than 25 pounds until 6 months post-op
  - Goal of return to work without restrictions at 6 months post-op