

PHYSICAL THERAPY PROTOCOLS

TYPE THREE - ROTATOR CUFF REPAIR Large to Massive Tear (Greater than 5 cm)

I. PHASE I – IMMEDIATE POST-OPERATIVE PHASE (WEEKS 0-6)

DAYS 0-14

Patient is seen 2 days post-operative to remove surgical dressings and pain catheter. Showering is allowed once dressings and catheter are removed. The patient is seen 2-3x/week for supervised rehab. MD visits at 2 weeks and 6 weeks.

REHABILITATION GOALS

- Gradual return to full ROM
- Increase shoulder strength
- Decrease pain

Brace Use: During the first 2 weeks, the patient wears sling/bolster 24 hrs/day except when in PT, showering or performing exercises at home.

MODALITIES

- Cryotherapy, interferential stimulation for pain control

EXERCISES

1. Passive ROM exercises (NO PULLEYS)
 - Flexion and abduction (within patient's tolerance)
 - IR & ER in scapular plane (within patient's tolerance)
2. Hand grip with putty or tennis ball
3. AROM: Elbow flexion-extension, forearm pronation-supination
4. AROM: Cervical spine
5. Continuous Passive Motion Machine (CPM) if ordered by MD

WEEKS 3-4

Brace Use: Brace is typically discontinued at 2 weeks by MD

MODALITIES

- Ice, electric stimulation for pain control

EXERCISES

1. Continue PROM exercises
 - Flexion, abduction, ER, IR, all within patient's tolerance
2. Initiate proprioception training
3. Submaximal, non-painful isometric shoulder exercises in all planes
4. PRE's for elbow and wrist
5. Cardio: Stationary cycling

WEEKS 5-6: EXERCISES

1. Continue ROM – passive stretching and initiate self stretches with cane IR & ER
2. Continue isometrics may begin Flexion, abduction and extension
3. Continue PRE's for elbow and wrist

II. PHASE II – INTERMEDIATE PHASE: MODERATE PROTECTION PHASE (WEEKS 7-12)

The patient is seen usually 2 days/week for supervised rehab and performs home program 3x/week. MD visit at 12 weeks.

GOALS

- Restore full range of shoulder motion
- Improve shoulder dynamic stability
- Improve shoulder proprioception

WEEKS 7-8: EXERCISES

1. Continue with stretching
2. Initiate tubing for IR & ER, extension
3. Initiate Active Assistive cane exercises for flexion and abduction, progressing to active shoulder flexion, scaption, and abduction without resistance
4. Initiate PNF movements without resistance
5. Cardio: Stationary cycling, elliptical trainer, deep water running with vest

WEEKS 9-12: EXERCISES

1. May initiate more aggressive strengthening: Resistive flexion, abduction, scaption
2. Progress strengthening exercises
3. Continue all stretching exercise
4. Cardio: May begin running at 12 weeks

Progress ROM to functional demands of sport or work

III. PHASE III – MINIMAL PROTECTION PHASE (WEEKS 13-20)

Patient is seen by MD at 4, 5 and 6 months.

GOALS

- Establish and maintain full ROM
- Improve muscular strength, power and endurance
- Gradually initiate functional activities

WEEKS 13-20: EXERCISES

1. Stretching to maintain ROM for overhead activity
2. Continue all isotonic exercises, weights and tubing
3. Chest press (protected ROM), shoulder press, lat pulldowns in front only, rows
4. Two armed plyometrics, progress to one armed plyos
5. Initiate interval sport/work program (throwing, work simulation)

IV. PHASE IV – RETURN TO ACTIVITY PHASE (MONTHS 4-6)

GOALS

- Enhance muscular strength, power and endurance
- Progress functional activities
- Maintain shoulder mobility
- Gradual return to sport or work activities

4-6 MONTHS: EXERCISES

1. Continue all flexibility and strengthening exercises
2. Progress interval sport or work conditioning programs
3. Gradually progress to sport or work activities to unrestrictive participation