



Orthopaedic Specialty Institute

Medical Group of Orange County

DR. ROBERT GRUMET, MD
280 S. MAIN ST. SUITE 200
ORANGE, CA 92868
PHONE: 714-937-2113
FAX: 714-634-4569

PATIENT NAME: _____

DATE OF SURGERY: _____

Post Operative Arthroscopic Rotator Cuff Repair Rehabilitation Protocol

Patient Education for Initial Repair Protection Guidelines

- Remain in your sling at all times, except for showering. You may remove the sling to bend and straighten your elbow and wrist only. Keep your elbow at your side. Do not raise your elbow to shoulder level.
 - Remain in sling while sleeping
- Continue to ice shoulder for 20 minutes several times a day as needed, especially after exercise sessions

Phase I: Weeks 1-2

Goals:

- Provide patient with education on initial repair protection to maintain integrity of the repair
- Begin initial PROM and gradually increase
- Prevent muscular inhibition
- Initiate muscle activation and isometrics to prevent atrophy
- Emphasize scapular stabilization
- Decrease pain and inflammation

Precautions:

- Keep incisions clean and dry
- Manage scarring around portal sites
- Avoid lifting of any objects
- Avoid excessive shoulder extension
- Avoid excessive stretching or sudden movements
- Avoid supporting body weight with hands

POD 1-7

- Remain in Abduction Pillow Sling
- Pendulum Exercises
- PROM
 - Flexion to tolerance
 - ER/IR → to be done in scapular plane at 45 degrees of abduction
- Active Assisted ROM
 - ER/IR → to be done in scapular plane at 45 degrees of abduction
- Elbow/Hand ROM & Gripping Exercises
- Isometrics (*begin POD 4-5*) → *pain free*
 - Flexion with elbow bent to 90 degrees
 - ER/IR with elbow at side
 - Elbow Flexion/Extension

POD 8-14

- Remain in Abduction Pillow Sling
- Continue Pendulum Exercises
- Progress PROM to tolerance
 - Flexion → 115 degrees
 - ER in scapular plane at 45 degrees of abduction → 20-25 degrees
 - IR in scapular plane at 45 degrees of abduction → 30-35 degrees



Orthopaedic Specialty Institute

Medical Group of Orange County

DR. ROBERT GRUMET, MD
280 S. MAIN ST. SUITE 200
ORANGE, CA 92868
PHONE: 714-937-2113
FAX: 714-634-4569

PATIENT NAME: _____

DATE OF SURGERY: _____

- Active Assisted ROM
 - ER/IR → to be done in scapular plane at 45 degrees of abduction
 - Flexion to tolerance
 - *Note: assistance by physical therapist, especially with eccentric control (lowering arm)*
- Continue Elbow/Hand ROM & Gripping Exercises
- Continue Isometrics → *subpainful*
 - Flexion w/ Elbow Bent
 - Extension w/ Elbow Bent
 - Abduction w/ Elbow Bent
 - ER/IR in scapular plane at 45 degrees of abduction
 - Elbow Flexion/Extension

Phase II: Weeks 2-6

Goals:

- Continue to educate patient on repair protection
 - Allow healing of soft tissue
 - Avoid overstressing healing tissue
- Gradually restore full PROM
 - *Note: patient should have full PROM by week 4*
- Emphasize scapular stabilization and re-establish dynamic shoulder stability
- Continue to decrease pain and inflammation

Precautions:

- Manage scarring around portal sites
- Avoid lifting of any objects
- Avoid excessive shoulder extension and reaching behind back movements
- Avoid excessive stretching or sudden movements
- Avoid supporting body weight with hands

Week 3

- Remain in Abduction Pillow Sling
- Continue PROM to tolerance
 - Flexion → 140-155 degrees
 - ER at 90 degrees of abduction → 45 degrees
 - IR at 90 degrees of abduction → 45 degrees
- Active Assisted ROM to tolerance
 - ER/IR in scapular plane at 45 degrees of abduction
 - ER/IR at 90 degrees of abduction
 - Flexion to tolerance
 - *Note: assistance by physical therapist, especially with eccentric control (lowering arm)*
- Initiate Scapular Isometrics
- Dynamic Shoulder Stabilization
 - ER/IR in scapular plane
 - Flexion at 100 degrees and 125 degrees



Orthopaedic Specialty Institute

Medical Group of Orange County

DR. ROBERT GRUMET, MD
280 S. MAIN ST. SUITE 200
ORANGE, CA 92868
PHONE: 714-937-2113
FAX: 714-634-4569

PATIENT NAME: _____

DATE OF SURGERY: _____

Weeks 4-5

- Use of sling → *at physician's discretion*
- Continue active assisted ROM and stretching exercises
- ER/IR strengthening at 0 degrees of abduction
- Manual Resistance ER in Scapular Plane → SUPINE
- Prone Rowing to Neutral Arm
- Prone Shoulder Extension
- Begin Isotonic Elbow Flexion
- Dynamic Shoulder Stabilization
 - ER/IR
 - Flexion at 45, 90, 125 degrees

Weeks 5-6

- Use of sling → *at physician's discretion*
- Continue active assisted ROM and stretching exercises
 - *Note: especially in movements in which normal ROM is not achieved: flexion, ER at 90 degrees of abduction*
- Begin ACTIVE ROM Exercises
 - Shoulder Flexion in Scapular Plane
 - Shoulder Abduction

Phase III: Weeks 7-14

Goals:

- Achieve full AROM by weeks 8-10
- Maintain full PROM
- Gradual restoration of shoulder strength focusing on form and scapular control
- Progress patient to return to functional daily activities

Weeks 7-9

- Continue stretching and PROM prn to maintain full ROM
- Continue dynamic shoulder stabilization exercises
- Strengthening Progression Program
 - ER/IR with tubing
 - Sidelying ER
 - Lateral Raises
 - Full Can in Scapular Plane
 - Prone Rowing
 - Prone Horizontal Abduction
 - Prone Extension
 - Elbow Flexion
 - Elbow Extension
 - ****NOTE: patient must be able to elevate arm w/o upper trap compensation or scapular hiking prior to initiating isotonic.**



Orthopaedic Specialty Institute

Medical Group of Orange County

DR. ROBERT GRUMET, MD
280 S. MAIN ST. SUITE 200
ORANGE, CA 92868
PHONE: 714-937-2113
FAX: 714-634-4569

PATIENT NAME: _____

DATE OF SURGERY: _____

Weeks 9-11

- Continue all stretching and strength progression exercises
- May initial isotonic resistance w/ 1# during flexion and abduction
- Progress to fundamental shoulder exercises
- May initiate LIGHT functional exercises

Weeks 11-14

- Continue all stretching and ROM exercises
- Progress strengthening program
 - May increase 1#/10 days if non-painful

Phase IV: Weeks 15-22

Goals:

- Maintain full non-painful ROM
- Enhance functional use of UE
- Improve muscular strength and power
- Gradual return to functional activities

Week 15-20

- Continue all stretching and ROM exercises
- Initiate self capsular stretches
- Continue to progress shoulder strengthening program
- *May initiate Interval Golf Program (if appropriate)*

Weeks 20-22

- Continue all stretching and ROM exercises
- Continue self capsular stretches
- May initiate progression to sport specific exercises (golfing, tennis, swimming)

Phase V: Return to Activity Phase (6 month post op)

Goals:

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