

Center for Athletic Medicine
Dr. Preston Wolin
Rotator Cuff Repair (Type III) Protocol
Large to massive tears – Greater than 4cm
Supraspinatus and/or Infraspinatus
~Please call 773.248.4150 with any and all questions~

I. Phase I - Immediate Post-Surgical Phase (Day 1-10)

Goals: Maintain Integrity of the Repair

Gradually Increase Passive Range of Motion

Diminish Pain and Inflammation

Prevent Muscular Inhibition

Day One to Six:

- Sling or Slight Abduction Brace **Physician Decision
- Pendulum Exercises 4-8x daily (flexion, circles)
- Active Assisted ROM Exercise (L-Bar)
 - ER/IR in Scapular Plane
- Passive ROM
 - Flexion to tolerance
 - ER/IR in Scapular Plane (Gentle ROM)
- Elbow/Hand Gripping & ROM Exercises
- Submaximal Gentle Isometrics
 - Flexion
 - Abduction
 - External Rotation
 - Internal Rotation
 - Elbow Flexors
- Cryotherapy for Pain and Inflammation
 - Ice 15-20 minutes every hour
- Sleeping
 - Sleep in Sling or Brace

Day Seven to Ten:

- Continue Use of Brace or Sling
- Continue Pendulum Exercises
- Progress Passive ROM to Tolerance
 - Flexion to at least 90 degrees
 - ER in Scapular Plane to 35 degrees
 - IR in Scapular Plane to 35 degrees
- Continue Elbow/Hand ROM & Gripping Exercises
- Continue Submaximal Isometrics
 - Flexion with Bent Elbow
 - Extension with Bent Elbow
 - Abduction with Bent Elbow
 - ER/IR with Arm in Scapular Plane
 - Elbow Flexion

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- Continue Use of Ice for Pain Control
 - Use Ice at least 6-7 times daily
- Sleeping
 - Continue Sleeping in Brace until Physician Instructs

Precautions:

1. Maintain Arm in Brace, Remove Only for Exercise
2. No Lifting of Objects
3. No Excessive Shoulder Extension
4. No Excessive or Aggressive Stretching or Sudden Movements
5. No Supporting of Body Weight by Hands
6. Keep Incision Clean & Dry

II. Phase II - Protection Phase (Day 11 – Week 6)

Goals: Allow Healing of Soft Tissue

Do Not Overstress Healing Tissue

Gradually Restore Full Passive ROM By week 6

Re-Establish Dynamic Shoulder Stability

Decrease Pain & Inflammation

Day 11 – 14:

- Continue Use of Brace
- Passive Range of Motion to Tolerance
 - Full Flexion
 - ER at 90 degrees abduction to at least 45 degrees (working to 90 degrees)
 - IR at 90 degrees abduction to 30 degrees max (by 6 wks)
- Dynamic Stabilization Drills
- Rhythmic Stabilization Drills
 - ER/IR in Scapular Plane
 - Flexion/Extension at 100 degrees Flexion
- Continue All Isometric Contractions
- Continue Use of Cryotherapy as needed
- Continue All Precautions

Week 3 - 4:

- Initiate AAROM Flexion in Supine (Therapist supports arm during motion)
- Active Assisted ROM to Tolerance
 - ER/IR in Scapular Plane
 - ER/IR at 90 degrees Abduction (IR only to 30 deg max)
- Continue all exercises listed above
- Progress Passive ROM till approx. Full ROM at week 6 except for IR.
- Initiate Prone Rowing to Neutral arm Position
- Initiate Isotonic Elbow Flexion
- Continue use of ice as needed
- May use heat prior to ROM exercises
- May use pool for light ROM exercises

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- Continue Use of Brace during Sleeping Until End of Week 4-6 (or per MD instruction)
- Discontinue Use of Brace at End of Week 4-6 (per MD instruction)

Week 5 – 6:

- Full PROM at 6 wks (full flexion, ER@90 degrees ABD to 90 degrees, and IR @90 degrees ABD to 30 degrees)
 - May use heat prior to exercises
 - Continue AAROM and Stretching exercises
 - Initiate Active ROM Exercises (6 wks)
 - Shoulder Flexion Scapular Plane
 - Shoulder Abduction

Precautions:

1. No Lifting
2. No excessive behind the back movements
3. No Supporting of Body Weight by Hands & Arms
4. No Sudden Jerking Motions

III. Phase III – Intermediate Phase (Week 7-14)

Goals: Full Active ROM (Week 10-12)

Maintain Full Passive ROM

Dynamic Shoulder Stability

Gradual Restoration of Shoulder Strength & Power

Gradual Return to Functional Activities

Week 10:

- Continue Stretching & PROM (as needed to maintain full ROM)
- May begin IR @ 90 degrees ABD beyond 30 degrees
- Continue Dynamic Stabilization Drills
- Progress Strengthening / Isotonic/ tubing Program
 - ER/IR Tubing
 - ER Sidelying
 - Lateral Raises* (Active ROM Only)
 - Full Can in Scapular Plane* (Active ROM Only)
 - Prone Rowing
 - Prone Horizontal Abduction
 - Elbow Flexion / Bicep curls
 - Elbow Extension

*Patient must be able to elevate arm without shoulder or scapular hiking before initiating isotonic; if unable, continue glenohumeral dynamic stabilization exercises.

*If physician permits, may initiate Light functional activities

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Week 14:

- Continue all exercise listed above
- Progress to Independent Home Exercise Program (Fundamental Shoulder Exercises)

IV. Phase IV – Advanced Strengthening Phase (Week 15 - 22)

Goals: Maintain Full Non-Painful ROM

Enhance Functional Use of UE

Improve Muscular Strengthen & Power

Gradual Return to Functional Activities

- Continue ROM & Stretching to maintain full ROM
- Self Capsular Stretches
- Progress Shoulder Strengthening Exercises

- Fundamental Shoulder Exercises
- Continue all exercises listed above

V. Phase V – Return to Activity Phase (Week 23 - 30)

Goals: Gradual Return to Strenuous Work Activities

Gradual Return to Recreational Sport Activities

- Continue Fundamental Shoulder Exercise Program (at least 4 times weekly)
- Continue Stretching, if motion is tight
- May initiate interval sport program (i.e., golf, etc)

*****If a patient is not progressing, please call the office for recommendations*****