

ROTATOR CUFF REPAIR REHABILITATION GUIDELINES

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PHASE 1: Immediate Post-Op (Surgery – 4/6 weeks)			
Goals	☐ Control swelling and ice, compression, and elevation and pain control		
Restrictions	 □ NO active ROM exercises □ Active ROM exercises initiation based on the size of the tear ○ Small Tears (0-1 cm) – no active ROM before 4 weeks ○ Medium Tears (1-3 cm) – no active ROM before 6 weeks ○ Large Tears (3-5 cm) – no active ROM before 6 weeks ○ Massive Tears (>5 cm) – no active ROM before 8 weeks □ NO strengthening or resisted motions of the shoulder until 8-12 weeks 		
Immobilization	 □ Type of immobilization depends on amount of abduction required to repair rotator cuff tendons with little or no tension ○ Small & Medium Tears – 1-2 weeks ○ Large Tears (3-5 cm) & Massive Tears (>5 cm) – 6-8 weeks 		
Pain Control	 □ Patients treated with arthroscopic rotator cuff repair experience less postoperative pain than those with mini-open or open repairs □ Narcotics for 7-10 days following surgery □ NSAIDS for patients with persistent discomfort – limit in large/massive first 4 weeks □ Therapeutic modalities 		
Exercises	□ Passive ONLY □ 100 degrees of forward elevation □ 20 degrees of external rotation □ 70 degrees of abduction □ Scapular protraction/retraction □ Elbow ROM with supination and pronation prn □ Emphasize supine stretching MUSCLE ACTIVATION □ Grip strength only		
Progression Criteria	☐ At least 6 weeks since surgery ☐ Painless passive ROM: 140 forward elevation, 40 external rotation, 60-80 abduction		



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PHASE 2: Weeks 6 – 12					
Goals	☐ 160 degrees forward elevation				
	 □ 60 degrees external rotation □ 90 degrees abduction 				
	□ NO strengthening or resisted motions of the shoulder until 12 weeks after surgery				
Restrictions	□ No AROM for patients with massive tears first 8 weeks				
Immobilization	☐ Discontinuation of sling or abduction orthosis, use for comfort only				
Pain Control	□ NSAIDs for patients with persistent discomfort following surgery				
	☐ Therapeutic modalities				
Exercises	ROM	 □ Continue with passive ROM exercises to achieve above goals □ Begin active assisted TOM exercises □ Progress to active ROM exercises as tolerated after full motion achieved with active assisted exercises □ Light passive stretching at end ROMs 			
	MUSCLE ACTIVATION	 □ Begin rotator cuff and scapular stabilizer strengthening for small tears with excellent healing potential □ Continue with grip strengthening 			
Progression	☐ Painless active ROM				
Criteria	☐ No shoulder pain or tenderness and satisfactory clinical examination				



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PHASE 3: Months 4 – 6				
Goals	☐ Improve shoulder strength, power, and endurance			
	☐ Improve neuromuscular control and shoulder proprioception			
	□ Prepare for gradual return to functional activities			
	☐ Establish a home exercise maintenance program that is performed at least three times weekly			
	ROM	☐ Achieve motion equal to contralateral side		
		☐ Passive capsular stretching and end ROMs, especially cross-		
		body, adduction and internal rotation to stretch the posterior		
		capsule		
		☐ Rotator cuff strengthening, begin with closed chain isometrics ○ Internal rotation, external rotation, abduction, forward		
	STRENGTHENING	o Internal rotation, external rotation, abduction, forward elevation, extension		
		☐ Progress to open chain strengthening with TheraBand's		
		 Exercises performed with the elbow flexed to 90, 		
Exercises		starting position is with the shoulder in the neutral		
		position, exercises are performed through an arc of 45		
		degrees in each of the five planes		
		 Progression to the next band occurs usually in 2–3- week intervals 		
		□ Progess to light isotonic dumbbell exercises		
		☐ Strengthening of the deltoid – especially anterior deltoid		
		☐ Strengthening of scapular stabilizers		
		Scapular retraction, protraction, depression, shoulder		
		shrugs		
		☐ Progressive systematic interval program for returning to sports		
Maximal Improvement and Warning Signs	□ Small Tears – 4-6 m	onths		
	☐ Medium Tears – 6-8 months			
	☐ <u>Large and Massive Tears</u> – 8-12 months			
	*Patients will continue to show improvement in strength and function for at least 12 months			
	Warning Signs: loss of motion, lack of strength progression, continued night pain			