Rotator Cuff Repair Physical Therapy Protocol

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Patient Name:	Date of Surgery:
Associated Procedure (circled if applicable):	
 Subacromial Decompression 	
 Labral Debridement 	
Biceps Tenodesis:	

- Distal Clavicle Resection:
 - o Weeks 0-8: No cross-body adduction, abduction >90°, or rotation in 90°
- Partial Subscapularis Repair:
 - Weeks 0-4: No ER>0°
 - \circ Weeks 4-6: No ER > 30°
 - o Weeks 6-12: Begin active IR

• Weeks 0-4: No resisted elbow flexion.

- O Weeks 12+: Begin resisted IR
- Complete Subscapularis Repair
 - Weeks 0-6: No ER>0°
 - \circ Weeks 6-8: No ER >30°
 - o Weeks 8-12: Begin active IR
 - O Weeks 12+: Begin resisted IR

__ Phase I (0-6 wks): Period of protection: In general, sling should be worn at all times during this phase (except for hygiene and PT). Passive shoulder ROM only (ie. NO active ROM). No cuff strengthening until after 3 months. PT starts 2 weeks after surgery.

PLEASE NOTE:

- NO shoulder extension or combined extension/abduction
- NO UBE or Body Blade

Weeks 0-1:

- Sling at all times (except for hygiene and pendulums); pillow behind elbow at night to prevent extension.
- Home exercises (pendulums, elbow + wrist ROM, grip strengthening).

Weeks 1-6:



- Sling at all times (except for hygiene and PT); pillow behind elbow at night to prevent extension.
- <u>ROM</u>: PASSIVE ROM ONLY. Forward elevation, ER with arm at side, abduction without rotation, as outlined to maximums as listed below:
 - o Goals by 6 wks: Forward elevation 140°, ER with the elbow at the side 40°, maximum abduction 60-80° without rotation.
 - o No shoulder extension.
 - o No internal rotation.
- <u>Strengthening</u>: NONE except grip strengthening.
- Heat before, ice after.

_Phase II (6-12 wks): Transition to active motion and protected strengthening. STILL NO SHOULDER EXTENSION OR COMBINED EXTENSION/ABDUCTION. NO UBE or BODY BLADE

- D/C sling if cleared by MD
- ROM: Light passive stretching at end ranges. Begin AAROM (canes, pulleys, etc.) and progress supine to vertical; gradually progress to AROM after 8 weeks.
 - o Goals: full motion by 12 weeks.
- <u>Strengthening</u>:
 - o Begin periscapular, pec/latissimus/trapezius isometrics with arms below shoulder level @ 6wks.
 - o @ 8 wks, begin deltoid and cuff isometrics with arm at the side.
 - o No resisted shoulder motions until after 12 wks.

__ Phase III (3-9 months): Begin gentle cuff strengthening and progress to sport-specific/occupational-specific rehab

- **ROM:** Full AROM as tolerated. Passive stretching at end ranges if full motion not achieved.
- Therapeutic Exercises:
 - Advance as tolerated from isometrics → bands → light weights (1-5lbs) with 8-12 reps x 2-3 sets for cuff, deltoid, scapular stabilizers. Only perform 3x/wk to avoid cuff tendonitis.
 - Begin eccentrically resisted motions, plyometrics (weighted ball toss), proprioception (body blade)
 - o @ 4.5 Months
 - Begin sports-specific/occupation-specific rehab and advance conditioning
- Work
- Overhead work without lifting is possible at 6 months
- Can resume heavy labor once full strength achieved (~9-12 months)
- Throwing/Racquet Sports
 - If full strength, may initiate throwing/racquet program at 6mo
 - Throwing from pitcher's mount at 9 months
- Return to Collision Sports

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■ ~9 months