

Arthroscopic Rotator Cuff Repair Protocol

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Post-Op Weeks 0-2:

Codman's Exercises; PROM by therapist (internal & external rotation performed at <45 degrees abduction or flexion); Modalities; Abduction sling (out for home exercises); HEP-Pendulums, assisted sawing, hand/wrist/elbow exercises

Post-Op Weeks 2-4:

Sub-maximal isometrics for flexion, adduction, extension, internal and external rotation, horizontal abduction adduction; Joint mobilization (grades I-II) to decrease pain; Maintain full elbow, wrist, and cervical ROM; Abduction sling (Begin to get out around the house - No overhead or away from body movements, lifting no more than a cup of coffee or can of pop). If ER is struggling, can start supine ER AAROM using cane at 3 weeks post-op

Post-Op Weeks 4-6:

Begin to discontinue abduction sling as comfort allows (can sleep without sling); Pulleys for flexion, abduction, and internal rotation; PROM by therapist (internal and external rotation performed at <90 degrees abduction or flexion); Joint mobilization (grades III-IV) to increase ROM; PROM for flexion, abduction, internal rotation, external rotation, horizontal abduction, and horizontal adduction; Scapular stabilization (scapular protraction and retraction)

Post-Op Week 6-8:

Restore full PROM; Active exercise; PRE for scapular stabilization

Post-Op Week 8-12:

Restore full A/PROM; Begin light Theraband and PRE's for all motions (focus on eccentric control and proper Scapulohumeral rhythm)

Post-Op Week 13:

Aggressive PRE's for UE; Plyometric program for overhead athletes