



Kansas City Orthopedic Alliance

H. Scott Ellsworth, MD

Rehabilitation Protocol: Rotator Cuff Repair (Standard)

Phase I (0-6 weeks): Protected ROM

- Initiate exercise program 3 times per day
 - Immediate elbow, forearm, and hand ROM out of sling
 - Pendulum exercises
 - Passive ER of the shoulder to tolerance
 - May need to instruct family member
 - Passive scapular plane elevation as tolerated
 - With family member or therapist
- May start active scapular mobility exercises at 3-4 weeks
 - Must keep the shoulder musculature relaxed
- AVOID all active and active assisted exercises until cleared by surgeon
 - This includes pulley, wand, and supine assisted exercises

Phase II (6-12 weeks): Progressive ROM

- May discontinue sling
- Lifting restriction of 2 lbs should be reinforced with patient
- Start AAROM and AROM
 - Includes pulleys, wand, and spine gravity assisted exercises
- Emphasize all motions including IR behind the back at 10-12 weeks
- Isolate and activate scapular stabilizers
- Progress PROM and terminal capsular stretching of the shoulder as needed
- AVOID AROM in position of subacromial impingement
- Can begin isometric cuff exercises with arm at side at week 8
- Can begin light resistance band exercises between weeks 8-10
- AVOID rotator cuff strengthening until week 12

Phase III (12+ weeks): Strengthening/Return to Function

- Discontinue formal lifting restrictions
- Advance rotator cuff and shoulder strengthening
 - TheraBand, dumbbells, Hughston's exercises, etc...
 - Include home cuff strengthening program

- o Continue to emphasize scapular stabilizers
- Equate active and passive ROM
 - o Encourage scapulohumeral mechanics during active shoulder motion
- Simulate work/recreational activities as rotator cuff strength and endurance improve
- Sport/Job specific activities at week 16
- AVOID standard gym activities involving shoulder until cleared by physician