

## **Rotator Cuff Repair Post op Rehab**

### **Weeks 1-4: Rest and Healing Phase**

Sling Immobilizer: at all times except for exercises.

HEP:

- Manual scapular manipulation with patient side-lying (non-operative side).
- Supine passive range of motion ROM forward-flexion in scapular plane to 120 degrees.
- Supine passive ROM external rotation to 30 degrees.

### **Weeks 4-6: Protective/ Early Motion Phase**

Sling Immobilizer: at all times except for exercises.

- PROM: Forward Flexion in Scapular Plane- No Limits, External Rotation 45 degrees, Internal Rotation 30 degrees
- Therapeutic Exercises: Codmans, Wand Exercises
- Strengthening: RTC isometrics with arm in 0 degrees of abduction and neutral rotation, Scapular Stabilization, no resistance, Abdominal and Trunk Exercises

### **Weeks 7-12: Early Strengthening Phase**

- Continue above exercises as necessary.
- PROM/AAROM: FF/ER/IR – Full (go slow with ER)
- Therapeutic Exercises:-Cont wand exercises for ER/IR/FF, Flexibility, horizontal adduction (post capsule stretching)
- Strengthening: RTC isotonic strengthening exercises
  - AROM: Sidelying ER and Supine FF in Scapular Plane
  - Progress to Standing FF  
ER/IR @ modified neutral w/ elastic bands

### **Weeks 12+: Late Strengthening Phase**

- Progress isotonic strengthening: periscapular and RTC musculature  
Lat pull downs, Row machine, chest press
- Flexibility: side-lying post capsule stretch
- Progress scapular stabilization program
- Initiate isokinetic strengthening (IR/ER) in scapular plane
- Begin light plyometrics at 16-18 weeks
- Individualize program to meet demands of sport specific requirements at 20-24 weeks
- Initiate throwing program for overhead athletes at 20-24 weeks