

Dr. Hagan Rotator Cuff Repair Rehabilitation Protocol Overview

Key: Deltoid is intact (Fibers split only). Cuff is repaired to bone; must protect during healing phase.

**Two Types: Type I Small Rotator Cuff tear. Type II Large Rotator Cuff tear*

Acute Phase IA: Day of surgery - 2 weeks post-operative

- Immobilize continuously
- Pain control measures, TENS, ice
- Elbow/wrist/hand exercises (putty, supination/pronation, flexion/extension)
- Cardiovascular fitness, encourage walking or stationary bike

Acute Phase IB: Weeks 2-6

**Do not initiate Phase IB exercises until week 5 for Type II Large Tears*

- Codman 4 point exercises
- Pulley with gentle passive flexion to approximately 90°
- Table slide for passive flexion and extension exercise
- Shoulder shrugs
- Towel stretch for internal rotation
- Passive range of motion for flexion, IR/ER, at 0° abduction and ER supine at 90° abduction
- Continue cardiovascular fitness. Gentle isometric strengthening for flexion, extension, abduction, ER/IR
- Modalities as needed: heat, ice, ultrasound, TENS
- Swimming pool activities with gentle passive shoulder mobilization but *NO ACTIVE* abduction

Phase II: Weeks 6-9

The cuff should be healed to bone; more aggressive mobilization and muscle conditioning can be initiated with a goal of obtaining full motion at end of Phase II. **Begin Phase II exercises at weeks 8-12 for Type II Large Tears*

- Continue progressive pendulum exercises
- Continue passive flexion/abduction and rotation with pulley and cane
- Begin active assisted range of motion with therapist
- Gentle progressive resisted internal and external rotation exercises, prone shoulder extension, prone horizontal abduction
- Theraband for IR/ER – neutral abduction
- Avoid supraspinatus resistance exercises
- Begin light PHF diagonals of flexion/extension and IR/ER – below 90°
- Gentle active nonresisted supraspinatus exercises below 90°

Phase III: Weeks 9-14

Surgical repair should be very stable; therapy can work toward reconditioning rotator cuff musculature

**Begin Phase III exercises at weeks 12-18 for Type II Large Tears*

- Continue passive/active assisted stretching for range of motion
- Progressive resistance exercises for rotator cuff musculature
- Begin wall push ups, progress to Cybex and Nautilus work as tolerated
- Continue more progressive PNF above 90°
- Gentle PRE stress exercises to supraspinatus

Phase IV: weeks 14-18

Patient's shoulder tissue should be healed; motion should be returning to normal **Begin Phase VI exercises at weeks 18-24 for Type II Large Tears*

- Continue previous modalities
- Begin sport specific modalities (golf, tennis, biomechanics, swimming, throwing biomechanics)
- Continue very specific supraspinatus strengthening exercises prone external rotation at 90°
- An isokinetic exercise (Biodex) strengthening test should be performed to assess overall progress- all cardinal planes are desired. Test at 60 or 90 seconds and at high velocity if desired. Progress to testing in 90° abduction as tolerated or in plane of scapula

****Routine clinic visits will be post-operative week 2, 6, 10, 14 & 24**