

PHYSICAL THERAPY PROTOCOL/PRESCRIPTION: ARTHROSCOPIC ROTATOR CUFF TEAR
Small/Medium Repair Protocol

Name: _____

Date of Surgery: _____

Diagnosis: _____

Signed: _____

Frequency: 2-3 times per week x 6 weeks.

1-6 Weeks:

- Sling Immobilization
- Active ROM Elbow, Wrist and Hand
- True Passive (ONLY) ROM Shoulder. NO ACTIVE MOTION.
 - Pendulums
 - Supine Elevation in Scapular plane = 140 degrees
 - External Rotation to tolerance with arm at side. (emphasize ER, minimum goal 40°)
- Scapular Stabilization exercises (sidelying)
- Deltoid isometrics in neutral (submaximal) as ROM improves
- No Pulley/Canes until 6 weeks post-op (these are active motions)

6-8 Weeks:

- Discontinue sling use.
- Begin Active Assist ROM and advance to Active as Tolerated
- Elevation in scapular plane and external rotation as tolerated
- No Internal rotation or behind back until 6wks.
- Begin Cuff Isometrics at 6wks with arm at the side

8-12 Weeks:

- Active Assist to Active ROM Shoulder As Tolerated
- Elevation in scapular plane and external rotation to tolerance
- Begin internal rotation as tolerated
- Light stretching at end ranges
- Cuff Isometrics with the arm at the side
- Upper Body Ergometer

3-12 Months

- Advance to full ROM as tolerated with passive stretching at end ranges
- Advance strengthening as tolerated: isometrics – bands – light weights (1-5 lbs); 8-12 reps/2-3 sets per rotator cuff, deltoid, and scapular stabilizers
- Only do strengthening 3x/week to avoid rotator cuff tendonitis
- Begin eccentrically resisted motions, plyometrics (ex. Weighted ball toss), proprioception (es. body blade)
- Begin sports related rehab at 4 ½ months, including advanced conditioning
- Return to throwing at 6 months
- Throw from pitcher's mound at 9 months
- Collision sports at 9 months
- MMI is usually at 12 months post-op