

Island Orthopaedics and Sports Medicine, P.C.

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POST-OPERATIVE GUIDELINES FOR ARTHROSCOPIC ROTATOR CUFF REPAIR OF MEDIUM TEARS 1-3 CM

Please Note: The time period refers to the seven days of the particular week noted. As examples, Post-op Week 1 includes days 1-7 and Post-op Week 7 includes days 43-49.

A full description can be found at www.shoulders.md/handouts.htm

Post-op week 1:

- Pendulums
- Elbow, wrist, hand AROM (elbow only if no contraindications-SLAP repair, biceps repair/anchor, biceps tenodesis)
- Modalities (Ice, electrical stimulation)
- Avoid shoulder extension past neutral (use towel roll/pillow under elbow in supine), IR beyond stomach, lifting, pushing, pulling, carrying, AROM, and sleeping on the involved side.

Post-op week 2:

- Pendulums
- Gentle pain-free PROM for forward elevation and external rotation within surgeon's ROM limits based off intra-operative assessment
- Supine AAROM external rotation with stick. Shoulder at 30-45 degrees of abduction and arm at least level with abdomen (use towel roll/pillow)
- Elbow, wrist, hand AROM (elbow only if no contraindications-SLAP repair, biceps repair/anchor, biceps tenodesis)
- Modalities (Ice, electrical stimulation)
- Avoid shoulder extension past neutral (use towel roll/pillow under elbow in supine), IR beyond stomach, lifting, pushing, pulling, carrying, AROM, and sleeping on the involved side.

**The initiation of physical therapy and the exact timing of progression during the rehabilitation process may vary.*

Post-operative guidelines of arthroscopic rotator cuff repair of medium tears 1-3cm

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Post-op week 3-4:

- PROM forward elevation and external rotation within ROM limits
- Supine AAROM ER with stick
- Self supine AAROM forward elevation within ROM limits
- Scapula control exercise by PT in side-lying: active-assisted/active/resistive (to begin to restore scapula stability/force couple)
- Continue elbow/wrist/hand AROM/gripping
- Modalities for pain/inflammation
- Continue to avoid extension, IR, lifting, pushing, pulling, carrying, AROM, and sleeping on the involved side.

Post-op week 5-6:

- Progress PROM
- Supine AAROM forward elevation with stick, continue AAROM ER with stick
- Pulley in scapula plane with quality ROM (no scapula hike), minimal pain/discomfort
- Sub-maximal isometrics of uninvolved tendons
- Scapula control exercise (manual resistance, scapula PNF).
- Continue to avoid extension, IR, lifting, pushing, pulling, carrying, AROM, and sleeping on the involved side.

Post-op week 7

- Strive to achieve full PROM
- Supine AAROM forward elevation with stick, continue AAROM ER with stick
- Pulley
- Isometrics
- Prone row, extension to neutral (no weight)
- Glenohumeral stabilization and rhythmic stabilization exercises in supine for forward elevation, IR/ER (to restore neuromuscular control and proprioception needed for dynamic stability of GH joint).
- Begin PROM/AAROM extension/IR
- Light bicep (if not contraindicated)/triceps strengthening

Post-op week 8-9

- Initiate AROM forward elevation in the scapula plane beginning with gravity eliminated positions (supine and side-lying) and progress according to quality of motion (semi-recumbent, sitting and/or standing). Avoid scapula hiking and begin with elbow flexed (short lever arm) and progress to elbow extended. Can begin with supported and progress to unsupported AROM exercises. *(This is usually not begun any earlier and may begin later based on patient progress and quality of tissue repair).*
- AROM Side-lying ER/IR (no weight)
- Continue week 7 program

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Post-op week 10-11:

- Initiate light resistance if normal AROM in these planes without abnormal or substituted movement patterns. Start with 1 lb. dumbbell and elastic band/tubing with least resistance:
 - Side-lying ER/IR
 - Prone extension/row
 - Scapula protraction supine
 - Elastic band/tubing for ER, IR, Extension to neutral, scapula retraction and when ready scapula punches/dynamic hug standing.
- AROM forward elevation in thumb-up “full can” position if no scapula hiking
- Stretch posterior shoulder/capsule (Sleeper stretch)
- Continue PROM/AAROM with stick as needed all planes
- Continue biceps/triceps strengthening

Post-op week 12-13

- Initiate light resisted forward elevation with thumb-up, “full can” position with dumbbell/band only when normal AROM has been achieved without substitution/scapula hike.
- UBE
- PROM and stretching as needed
- Begin PNF patterns
- Closed chain exercises
- Progress strengthening program

Post-op week 14-15

- Progress open and closed chain exercises as appropriate
- Maintain PROM and flexibility
- Begin light functional activity as appropriate and within surgeon’s guidelines
 - Return to work considerations
 - Sport specific activity