

Megan R. Wolf, MD Sports Medicine

ROTATOR CUFF REPAIR (MASSIVE OR REVISION) WITH OR WITHOUT BICEPS TENODESIS Post-Operative Protocol

Phase I – Maximum Protection

Weeks 0 to 6:

- Sling for 6 weeks, ultra-sling with abduction pillow
- Avoid passive shoulder motion until week 4
- Avoid active shoulder motion
- Avoid loaded elbow flexion
 - Passive range of motion only
 - No motion x4 weeks
 - Progressive PROM in all directions as tolerated beginning at 4 weeks
 - Avoid ER past 20 degrees if subscapularis repair

<u>Goals</u>

- o Reduce inflammation
- Decrease pain
- Postural education

Treatment suggestions

- \circ $\;$ Cervical range of motion and basic deep neck flexor activation (chin tucks).
- o Instruction on proper head, neck, and shoulder alignment and use of immobilizer
- Active hand and wrist range of motion.
- Active shoulder retraction
- Passive scapular mobility
- Upper thoracic mobilization
- Pendulums
- o Ice and modalities to reduce pain and inflammation

Phase II – Restoring mobility, function, and active range of motion

Weeks 6 to 12:

- Discontinue sling
- Delay RC strengthening until 10-12 weeks
- Resume light ADLs (<2 lb), ensuring no heavy lifting, pushing, pulling or repetitive reaching Goals
 - o Continued protection of repaired tissue, while slowly progressing to full active range of motion
 - Full PROM in all planes
 - No compensatory arm elevation strategies (e.g. no shoulder shrug with reaching)
 - Treatment suggestions
 - Progress from AAROM to AROM when adequate strength and motor control
 - Avoid loaded RC strengthening in overhead positions until 12-14 weeks (YTI drills, overhead lifting)
 - o Dynamic stabilization exercises with light perturbation isometrics
 - Progress to higher intensity cardio training (avoid running)
 - Begin light bicep loading between 8-12 weeks, progress slowly

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Phase III – Advanced strengthening and proprioception

Weeks 12 to 20:

Goals

- o Progressive strengthening and endurance training
- o Introduction of sport-specific drills (avoid participation in sport until cleared by surgeon)

Treatment suggestions

- \circ $\,$ Begin strengthening at or above 90 degrees with prone and/or standing YTI $\,$
- Initiate light bench press and shoulder press (pain-free)
- \circ ~ Closed chain perturbation training, plank progressions, etc.
- Push-up progression (counter height \rightarrow knee height \rightarrow floor)

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