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NEW ENGLAND

Orthopaedic Services

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COMPREHENSIVE PHYSICAL THERAPY

Melinda Amato OTR/L CHT Brandon Heyda OTR/CHT Raymond Ryan PT/Director Valerie Peckingham PT Isabella Mesturini PT,DPT Peter Ives PTA Kirsten Perillo PTA

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Rotator Cuff Repair (Standard) 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 active motion of shoulder
- Avoid loaded elbow flexion
- Passive range of motion only
 - No motion x2 weeks
 - Progressive PROM in all directions as tolerated
 - Avoid ER past 20 degrees if subscapularis repair

Goals

- Reduce inflammation
- Decrease pain
- o Postural education

Treatment suggestions

- o Cervical range of motion and basic deep neck flexor activation (chin tucks).
- Instruction on proper head, neck, and shoulder alignment
- Active hand and wrist range of motion.
- Active shoulder retraction
- Passive scapular mobility
- o Upper thoracic mobilization
- o 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
- 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
- Start strengthening when full AROM is achieved (progress slowly)
- o Avoid loaded RC strengthening in overhead positions until 12 weeks
- Dynamic stabilization exercises with light perturbation isometrics
- Progress to higher intensity cardio training (avoid running)
- Prone YTI drills
- o 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

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

Treatment suggestions

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

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