

Large/Massive Rotator Cuff/Re-repair Protocol Twin Cities Orthopedics Dr. Mair

WEEKS 0-6

- -Patient is to wear a sling at all times. Sling may be removed for exercises, showering, and dressing. OK to do tabletop activities within pain tolerance (eat, brush teeth, wrie and keyboarding).
- -Patient will be shown pendulum exercises at their first post-op visit.
- -Formal PT will not start until week 6 post op
- -AROM of the elbow, wrist, and hand

WEEKS 6-10

PRECAUTIONS: Do not increase inflammation

VISITS: 1-2 times/week

- -PROM in supine to trap the scapula
- -Begin AAROM with reciprocal pulleys, wand exercises in supine
- -Scapular stabilization exercise progression
- -Soft tissue mobilization as indicated
- -Joint mobilizations as indicated
- ** Subscapularis repair ER/IR to 30 degrees until week 8

GOALS: good scapular control and positioning in preparation for AROM fo the shoulder

WEEKS 10-12

PRECAUTIONS: Do not increase inflammation or overwork cuff

- -Progress to AROM gravity assisted initially
- -Progress to AROM no weight, weight of patient's arm is the resistance
- -Build endurance to patient tolerance
- -Progress scapular stabilization exercises

GOALS: Full, pain-free AROM by week 12.

CRITERIA TO PROGRESS TO ROTATOR CUFF STRENGTHENING: PAINFREE AROM.

3 MONTHS - 6 MONTHS

- -Progress rotator cuff strengthening exercises as tolerated.
- -Begin with closed chain isometrics for rotator cuff and progress to open chain strengthening with light free weights. Progression to the next weight level occurs at 2-3



weeks intervals. Patients should be instructed not to progress to the next level if there is any discomfort at the present level.

- -Progress scapular strengthening both open and closed chain.
- -Capsular stretching at end range as indicated for symmetrical ROM.

This protocol provides the clinician with general guidelines for the rehabilitation of the patient undergoing arthroscopic, mini-open or open repair of a large or massive rotator cuff tear.

Questions regarding the progress of specific patient are encouraged and should be directed to 952 442-8201 or to rehabprotocols@tcomn.com.