Henry Ford Health System

690 Amsterdam St., Detroit MI 48202 Ph: 313-972-4216

www.KelechiOkorohaMD.com

ROTATOR CUFF REAPIR

Rehab Protocol

Weeks 1-4:

- 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)

Weeks 4-6:

- 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

Weeks 6-12:

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, pylometrics (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



