

## Standard Rotator Cuff Repair Rehabilitation Protocol

Phase	Goals	Precautions/Restrictions	Treatment
Weeks 0-6	<ul style="list-style-type: none"> <li>• Protect surgical site</li> <li>• Decrease pain and inflammation</li> <li>• PRICE principles</li> <li>• Minimize muscle atrophy</li> <li>• Initiate passive range of motion</li> </ul>	<ul style="list-style-type: none"> <li>• No lifting of any object</li> <li>• Keep incision(s) clean and dry</li> <li>• No excessive shoulder extension</li> <li>• No excessive arm motions</li> <li>• Wear immobilizer with bolster except for hygiene and exercise performance</li> <li>• Do not force range of motion</li> </ul>	<ul style="list-style-type: none"> <li>• Active assisted range of motion of elbow, wrist and hand</li> <li>• Supine passive range of motion of shoulder               <ul style="list-style-type: none"> <li>○ <b>ER as tolerated</b></li> <li>○ <b>Supine Forward Flexion to 140</b></li> <li>○ Plane of the Scapula to 90</li> </ul> </li> <li>• Scapular retraction</li> <li>• Week 2-3: Core training may be initiated               <ul style="list-style-type: none"> <li>○ No stress to repair</li> </ul> </li> <li>• Week 2-3: May begin stationary bike</li> <li>• Cryotherapy: 5-7 times per day</li> <li>• <b>No pulley/canes until 6 weeks</b></li> </ul>
Weeks 6-12	<ul style="list-style-type: none"> <li>• Maintain integrity of repair</li> <li>• Progress PROM</li> <li>• Initiate AAROM to AROM               <ul style="list-style-type: none"> <li>○ Full AROM at week 12</li> </ul> </li> <li>• Normal scapular mechanics at week 12</li> <li>• Improve muscle activation</li> <li>• Improve motor control</li> </ul>	<ul style="list-style-type: none"> <li>• Sling worn for comfort beginning week 6, wean as tolerated</li> <li>• Immobilizer discontinued</li> <li>• Do not force motion</li> <li>• No weight bearing through involved shoulder</li> </ul>	<ul style="list-style-type: none"> <li>• Week 6: Progress PROM in all planes as tolerated.</li> <li>• <b>Avoid internal rotation until 6 weeks</b></li> <li>• Week 8: AAROM initiated and advanced to AROM as tolerated</li> <li>• Week 8: Shoulder isometrics may be initiated</li> <li>• Week 8: Rhythmic stabilization may be initiated               <ul style="list-style-type: none"> <li>○ IR/ER at 45 degrees in scapular plane</li> <li>○ Flexion at 100 degrees</li> </ul> </li> <li>• Week 8: Core/LE training               <ul style="list-style-type: none"> <li>○ No stress to repair</li> <li>○ Single plane/multi joint exercises</li> <li>○ Balance/proprioception</li> </ul> </li> <li>• Continue with stationary bike               <ul style="list-style-type: none"> <li>○ Up to 30 minutes</li> </ul> </li> <li>• Modalities as needed</li> </ul>
Weeks 12-16	<ul style="list-style-type: none"> <li>• Initiate RTC exercises</li> <li>• Initiate scapular stabilizer strengthening</li> <li>• Range of motion without compensation</li> </ul>	<ul style="list-style-type: none"> <li>• Do not force motion</li> <li>• No weight bearing through involved shoulder</li> </ul>	<ul style="list-style-type: none"> <li>• Advancement to isotonic exercise program per tolerance in all planes, including multiplane exercises</li> <li>• Week 12: May initiate use of elliptical or stair stepper</li> <li>• Modalities as needed</li> <li>• <b>Begin eccentrically resisted motion</b></li> </ul>

This protocol is not meant to be prescriptive but a recommendation to guide the rehabilitation process.  
 Each patient's progress may vary based on specifics to their injury and procedure.



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Weeks 16-24	<ul style="list-style-type: none"> <li>• Maintain integrity of repair</li> <li>• Address any remaining asymmetries in strength, endurance and movement patterns</li> <li>• Initiation of power development in athletes</li> <li>• 80% strength of involved to uninvolved side</li> </ul>	<ul style="list-style-type: none"> <li>• May begin loading through shoulder</li> <li>• Avoid aggravation of repair</li> <li>• Continue with low impact activity</li> </ul>	<ul style="list-style-type: none"> <li>• Continue with multiplane strength and initiate multiplane stretching. <ul style="list-style-type: none"> <li>◦ Avoid aggravation of repair</li> </ul> </li> <li>• Advance proprioception exercises</li> <li>• Anaerobic and aerobic interval training <ul style="list-style-type: none"> <li>◦ Low impact</li> </ul> </li> <li>• Week 16: Core/LE training <ul style="list-style-type: none"> <li>◦ Light loading through shoulder begins</li> <li>◦ Multi plane/multi joint exercises</li> <li>◦ Balance/proprioception</li> </ul> </li> <li>• Week 20: Initiate plyometric activity</li> <li>• Week 20: Initiate interval sports program <ul style="list-style-type: none"> <li>◦ Met strength and mobility goals</li> <li>◦ Begin throwing program, running program, golf program</li> </ul> </li> <li>• Continue with core stability</li> <li>• Week 16: QuickDASH, FOTO PRO</li> <li>• Week 16: HHD/ isokinetic test</li> </ul>
Weeks 24+	<ul style="list-style-type: none"> <li>• Initiate return to sport progression</li> <li>• Initiate plyometric exercise progression</li> <li>• Initiate higher level impact activity</li> </ul>	<ul style="list-style-type: none"> <li>• Focus on form and control during exercise performance</li> <li>• Use of appropriate work rest intervals</li> <li>• Assess tolerance to activity during, after and at 24 hours after activity</li> </ul>	<ul style="list-style-type: none"> <li>• Low level sport specific activity, progressing to higher demand activity</li> <li>• Continue with Anaerobic and aerobic interval training</li> <li>• Continue with core stability</li> <li>• Multiple planes</li> <li>• Stability in all 3 planes of motion</li> <li>• Sport specific movements when able</li> <li>• Plyometric activities progressing from simple to complex, less load to more load</li> <li>• Week 24: QuickDASH, FOTO PRO</li> <li>• 1 year follow up: HHD/ isokinetic test</li> </ul>

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