



## Rotator Cuff Repair Rehabilitation

### Phase 1

#### Sling

- 1) Full time use for 6 weeks
- 2) Sleep in sling until after week 6
- 3) Discontinue only after week 6

#### Weeks 0-6

- 1) Passive motion only beginning first post-operative day
  - Forward elevation (Goal  $\geq 140^\circ$  ASAP)
  - External rotation (Goal  $\geq 40^\circ$  ASAP)  
\*\* Hold at  $40^\circ$  if labral repair was also done \*\*
  - Extension not beyond  $0^\circ$
  - **No** internal rotation until week 7
- 2) Hand and wrist active motion. Elbow active motion if no biceps tenodesis.
- 3) Scapular stabilization exercises (Shrugs, Retraction, Protraction)
- 4) Home exercise program
  - External rotation, passive with caregiver
- 5) **NO pulleys, pool therapy, or electric stimulation until after week 6**

### Phase 2

#### Weeks 7-12

- 1) Continue passive motion as needed until full range of motion, then start AAROM and advance to full AROM
- 2) Continue Scapular Stability exercises
- 3) Add passive internal rotation
- 4) Home exercise program
  - Add wall climb, self-controlled active assisted elevation, supine wand exercises

### Phase 3

#### Week 12+

- 1) **Begin strengthening upon approval by Dr. Metcalf**
  - Low Level therabands/tubes: FE, IR, ER, Rows
- 2) Transition to Independent Home Exercise Program
  - Stretching Daily
  - Strength 3x/wk max

#### Month 6

- 1) Return to full activity

### Specific Needs:

- 1) Biceps tenodesis
  - Elbow-passive motion only first 6 weeks
  - Avoid terminal extension of elbow first 6 weeks
  - Gradual Biceps strengthening after 12 weeks
- 2) Labral repair
  - Limit external rotation to  $40^\circ$  for first 6 weeks

Please check our website for updates: <http://www.rcmclinic.com>

