

Arthroscopic Rotator Cuff Repair of Large/Complex Tears (Type II)



Dr. Campbell

Phase I: Immediate Post-Surgical Phase (Days 1-21)

PRECAUTIONS

- No lifting of objects
- No excessive shoulder extension
- No excessive arm motions
- No overhead motions
- Wear shoulder brace or sling for 6 weeks until physician or physical therapist instructs
- No excessive external rotation (ER)/internal rotation (IR) range of motion (ROM) for 6-8 weeks unless directed by physician
- No excessive stretching or sudden movements
- No supporting of body weight by hands
- Keep incision clean and dry
- If biceps tenodesis, no elbow extensions < 30 degrees; no elbow flexion resistance

GOALS

- Maintain integrity of the repair.
- Promote tissue healing.
- Gradually increase PROM.
- Diminish pain and inflammation.
- Prevent muscular inhibition.

DAYS 1-6

OVERALL CARE

- Cryotherapy for pain and inflammation
- Ice 15-20 minutes approximately 4-6 times per day –or as pain determines

BRACE

- 30° abduction pillow brace

- Sleep in pillow brace until instructed to discontinue

PASSIVE RANGE OF MOTION

- ER/IR in Scapular Plane at 45° of abduction (pain-free ROM limited to 25° -30°)
- Flexion to tolerance (pain free ROM up to 90° with elbow flexed)

EXERCISES

- Supported pendulum exercises
- Elbow/hand gripping and ROM exercises – perform 4-6 times per day

DAYS 7-21

OVERALL CARE

- Continue use of ice for pain control
- Use ice at least 6-7 times daily

BRACE

- Continue use of pillow brace
- Continue sleeping in brace until physician instructs when to discontinue

RANGE OF MOTION

- Progress PROM
- Flexion to tolerance (at least 90° with elbow bent)
- ER in scapular plane at 45° abduction to 30-35°
- IR in scapular plane at 45° abduction to 30-35°
- Extension and abduction with bent elbow

EXERCISES

- Supported pendulum exercises
- Continue elbow/hand ROM and gripping exercises

*If you have any problems or questions,
please call your doctor's office (8am-5pm).*

Answering service for after hours.

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- Elbow flexion AROM if no tenodesis
- May apply electrical muscle stimulation to shoulder external rotators for muscle re-education

Phase II: Protection Phase (Day 22-6 Weeks)

PRECAUTIONS

- No heavy lifting of objects
- No carrying heavy objects
- No excessive behind the back movements
- No supporting of body weight by hands and arms
- No sudden jerking motions

GOALS

- Allow healing of soft tissue
- Do not overstress healing tissue
- Gradually restore full PROM (Week 6-12)
- Re-establish dynamic shoulder stability
- Decrease pain and inflammation

WEEKS 4-6

OVERALL CARE

- Continue use of cryotherapy as needed

BRACE

- Continue use of sling or brace, wean out of sling by week 7 (physician or physical therapist will determine when to discontinue after week 6)

RANGE OF MOTION

- PROM to tolerance within prescribed ranges
- PROM flexion to 120°
- PROM ER at 45° and 90° abduction to 45-50°
- PROM IR at 45° and 90° abduction to 30-45°

EXERCISES

- Initiate AAROM at week 6
- Rhythmic stabilization drills: flexion/extension at 100° flexion and 125° flexion at week 6
- Initiate scapular isometrics

Phase III: Intermediate Phase (Weeks 7-14)

GOALS

- Full AROM (by Week 12-14)
- Maintain full PROM
- Dynamic shoulder stability
- Gradual restoration of shoulder strength
- Gradual return to functional activities

WEEKS 7-9

RANGE OF MOTION

- Initiate stretching and continue PROM (as needed to maintain full ROM)

EXERCISES

- Initiate AROM at 8 weeks if AAROM is easy, 9-10 weeks if it is hard
- Initiate dynamic stabilization drills
- Elbow flexion unless biceps tenodesis
- Elbow extension

WEEKS 10-11

RANGE OF MOTION

- Continue stretching and PROM (as needed to maintain full ROM)

EXERCISES

- Continue all exercise listed above

WEEKS 12-14

RANGE OF MOTION

- Achieve full AROM

EXERCISES

- Progress all exercises
- Progress strengthening program (increase 0.5 kg/10 days, non-painful)

Phase IV: Advanced Strengthening Phase (Weeks 15-24)

GOALS

- Maintain full non-painful ROM
- Enhance functional use of upper extremity
- Improve muscular strength and power
- Gradual return to functional activities

WEEKS 15-19

RANGE OF MOTION

- Continue ROM and stretching to maintain full ROM

EXERCISES

- Self capsular stretches
- Progress shoulder strengthening exercises
- Functional shoulder exercises
- Initiate interval golf program (if appropriate)

WEEKS 20-24

EXERCISES

- Continue all exercises listed above
- Progress golf program to playing golf (if appropriate)
- Initiate interval tennis program (if appropriate) – week 24 (may wait till 6 months to initiate- physician will determine)
- May initiate swimming – week 26

Phase V: Return to Activity Phase (Weeks 24-36)

GOALS

- Gradual return to strenuous work activities
- Gradual return to recreational sport activities
- Maintain integrity of rotator cuff repair

EXERCISES

- Continue functional shoulder exercise program (at least 4 times weekly)
- Continue stretching, if motion is tight
- Continue progression to sport &/or work activity/participation
- Should continue functional shoulder exercise program until 12 months following surgery or until instructed to discontinue