

TRI-COUNTY ORTHOPEDICS

Foot & Ankle Center
Sports Medicine Center

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PHYSICAL THERAPY PROTOCOL: ARTHROSCOPIC ROTATOR CUFF REPAIR

Patient Name: James Shaw

Date: 10/2

Treatment Frequency: 2-3 times per week

Duration of Therapy Prescription: 4 weeks

Date of Surgery: 9/18

Diagnosis: s/p ☒ R ☐ L Shoulder RTC repair (☒ anchors)

☐ Subscapularis ☒ Supraspinatus ☐ Infraspinatus

Tear/Size: ☒ Small ☐ Moderate ☐ Large ☐ Massive

Phase I: (weeks 0-6) [Immediate Postoperative Period]

Goals:

- Healing / protect integrity of repair
- Gradually increase PROM
- Decrease pain and inflammation
- Prevent muscular inhibition
- Become independent with modified ADL's

Precautions:

- Arm in abduction sling, remove only for exercise/therapy
- No shoulder AROM, no lifting objects, no shoulder motion behind back,
- No excessive stretching or sudden movements
- No lifting of body weight by hands or supporting of any weight

- Weeks 1-2:**
- Sling Immobilization, cryotherapy for pain & inflammation (20 min/hr)
 - Active ROM Elbow, Wrist and Fingers
 - Passive ROM Shoulder: Pendulums only
 - Begin scapula musculature isometrics, cervical ROM
 - Patient education on posture, joint protection, positioning, hygiene

- Weeks 2-4:**
- Continue abduction sling & pendulum exercises & Cryotherapy PRN (pain/inflammation)
 - Begin PROM to tolerance (done supine; should be pain free)
 - Supine forward elevation in scapular plane to 90 degrees
 - External rotation in scapular plane ≥ 35 degrees
 - IR to body/chest
 - Scapular Stabilization exercises (side lying)
 - Deltoid isometrics in neutral (submaximal) as ROM improves
 - Continue elbow, wrist, and finger AROM
 - May resume general conditioning program (walking, stationary bicycle)

Criteria for Progression to Phase III:

Full AROM

Phase III: (weeks 12-16) [Early Strengthening]

Goals:

Full PROM/full AROM
Dynamic shoulder stability
Restore strength power endurance/
Optimize neuromuscular control
Return to functional activities

Precautions:

No lifting objects >5lbs
No overhead lifting
No sudden pushing or jerking motions
Avoid upper extremity bike and ergometer

Weeks 12-14: Initiate light functional activities as permitted
Progress to fundamental shoulder exercises

Weeks 14-16: Continue & advance fundamental shoulder exercises
Continue ROM and self-capsular stretching for ROM maintenance
Advance proprioceptive, neuromuscular activities
Light sports (golf chipping/putting, tennis ground strokes) if doing well

Criteria for Progression to Phase IV:

Ability to tolerate progression to low-level functional activities
Demonstrated return of strength/dynamic shoulder stability
Reestablishment of dynamic shoulder stability
Demonstrated adequate strength & dynamic stability for progression to more demanding work and sport specific activities

Phase IV: (16-22 weeks) [Advanced Strengthening]

Goals:

Maintain full nonpainful AROM
Advanced conditioning exercises for enhanced functional use
Improve muscular strength, power, and endurance
Gradual return to full functional activities

Weeks 16-22: Continue strengthening and stretching
Continue stretching if motion tight
Initiate interval sport program (golf, doubles tennis) if appropriate
Advance sports-specific strengthening & plyometrics
Continue strengthening and stretching
Improve scapular stabilization, mechanics, & strengthening
Initiate interval throwing program when full strength & motion achieved after week 22