## Michael W. Burris, MD Orthopaedic Surgery & Sports Medicine

Rehabilitation Guidelines: Conservative Rotator Cuff Repair

Post-op	Precautions	Therapy
0-6 weeks	<ol> <li>sling removed for bathing, exerises and meals</li> <li>No AROM or AAROM</li> <li>ER limited to 45°</li> <li>Table slides for forward flexion</li> <li>No strengthening</li> <li>No passive IR stretching</li> </ol>	Pendulums, table slides, passive ER with stick, active elbow/wrist/hand motion, cervical ROM, isometric scapular stabilization
6-12 weeks	1) Start overhead elevation with pulley and supine overhead with other arm 2) Initiate AAROM at 8 weeks 3) No strengthening until 12 weeks including active elevation 4) discontinue sling at 6 weeks 5) Start AROM at 12 weeks	Advance PROM, start rope and pulley, supine overhead stretches, gradual AROM, start cardiovascular exercise not stressful to shoulder
12-24 weeks	1)Begin strengthening with theraband only for 1 <sup>st</sup> 4 weeks 2)strengthening below 90° until scapular motion normal and RTC strength sufficient 3)start passive IR stretch at 12 weeks	Continue PROM/joint mobilization, initiate strengthening with therabands
>6 months	1) Return to all activities when cleared by surgeon	Sport specific activities

This is only a guide to rehabilitation. Specific exercises will be monitored by your physical therapist. Progression should be individualized based on meeting specific goals and tolerance to activities.

Return to activities is typically 6 months and is dependent on the progress of rehabilitation. Remember, trying to progress too rapidly cannot speed up the healing process and can compromise the rotator cuff repair and shoulder function.

