

Arthroscopic Rotator Cuff Repair Protocol (small-sized tears) Kyle F. Chun, MD

Phase I: 0-4 weeks

Goals:

- Protect surgery
- Decrease pain and inflammation
- Increase painfree range of motion
- Maintain distal muscle strength
- Patient education

Plan:

- Sling (0-4 weeks, remove only for hygiene and exercise)
- Modalities PRN
- Elbow, wrist and hand exercises
- Cervical spine stretches
- Pendulum exercises
- Scapular mobilization and strengthening
- Begin PROM: gentle flexion/abduction/ER/IR as tolerated
- Aquatic therapy after 3 weeks
- Cane exercises at the end of phase I
- Home Exercise program

Phase II: 5-10 weeks

Goals:

- Control pain and inflammation
- Functional range of motion by end of phase II
- Begin strengthening
- Able to perform self-care ADL's with involved extremity

Plan:

- Modalities PRN
- AAROM with care: all directions as tolerated
- PROM: all directions as tolerated
- Glenohumeral joint mobilization
- Isometric rotator cuff strengthening progressing to theraband exercise
- Bicep, tricep and scapular strengthening
- UBE (mid phase II)
- PNF for scapula and shoulder
- HEP

ORTHOPEDIC ASSOCIATES

Phase III: 11-20 weeks

Goals:

- Full, painfree ROM
- Painfree overhead activities
- Improve strength and neuromuscular control (80% normal strength)
- Progress activity specific exercises
- Improve endurance

Plan:

- UBE
- Self stretches
- Progress rotator cuff and scapular strengthening
- Machine weighted strengthening
- Begin coordination exercises (ball toss, Body Blade)

Phase IV: 20+ weeks

Goals:

- Improve strength (100%)
- Return to sport

Plan:

- Self stretches
- Progress strengthening, coordination and endurance exercise
- Sport/activity specific exercise

For questions regarding patient care, protocol clarification, or for renewals, please contact us at 808-521-8100. Most of our protocols are available online at www.kylechunmd.com