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## **ARTHROSCOPIC SMALL ROTATOR CUFF REPAIR POST-OPERATIVE REHABILITATION PROGRAM (1cm or less)**

### **Phase One – Maximum Protection Phase (week 0-8)**

#### **Phase One Goals:**

- Protect the anatomic repair**
- Promote early ROM**
- Promote dynamic stability**
- Diminish pain and inflammation**

#### Post-Op 0-4 weeks

- 1) Brace or Sling with activity and sleeping (4-6 weeks)
- 2) No Active Abduction (4-6 weeks)
- 3) Pendulum Exercises (Gentle)
- 4) PROM to tolerance in all shoulder motions
- 5) Grade I-II glenohumeral/scapulothoracic joint mobilizations
- 6) Initiate gentle scapular stabilization exercises
- 7) Active elbow ROM
- 8) Hand Gripping Exercises
- 9) Sub-maximal Isometrics at neutral (resting) position of shoulder
  - Flexors/Extensors
  - IR/ER
  - Elbow Flexors
- 10) Initiate T-band exercises for internal/external rotation (3-4 weeks)
- 11) AAROM
  - a. Flexion to 120°
  - b. ER/IR to 30°
- 12) Ice and pain modalities as tolerated

#### Post-Op 4-8 weeks

- 1) Discontinue brace or sling (4-6 weeks)
- 2) Continue PROM as tolerated
- 3) May begin active abduction at week 4-6
- 4) Grade II-III glenohumeral/scapulothoracic joint mobilizations
- 5) Continue AAROM exercises
  - a. Shoulder flexion to 0 -160°ER/IR range to tolerance
- 6) Continue scapular/core stabilization
- 7) Continue ice and pain modalities as tolerated
- 8) Begin PNF diagonal patterns with light to moderate weight as tolerated

## **Phase Two – Minimum Protection/Intermediate Phase (week 8-12)**

### **Phase Two Goals:**

- Gradually restore full ROM (week 10)**
- Preserve the integrity of the surgical repair**
- Restore muscular strength and balance**
- Reduce compensatory movements**

### Post-Op 8-10 weeks

- 1) Continue with AAROM exercises
  - Flexion to tolerance
  - ER/IR to tolerance (should be performed at 45-90° passive abduction)
- 2) Continue T-band exercises as tolerated (scapular plane)
- 3) Being light shoulder flexion exercise with low weight to 90° with focus on quality of movement
- 4) Elbow flexion/extension as tolerated
- 5) Scapula stabilization exercises as tolerated
- 6) Continue PNF diagonal patterns as tolerated

### Post-Op 10-12 weeks

- 1) Continue with all exercises above
- 2) Initiate rotator cuff strengthening outside of scapular plane (45°/90° abduction)
- 3) Initiate neuromuscular control exercises for scapula
- 4) Initiate plyometric strengthening
- 5) Isokinetic testing (week 12)

## **Phase Three – Advance Strengthening Phase (Week 12-15)**

### **Phase Three Goals:**

- Establish and maintain full ROM**
- Improve muscular strength, power, and endurance**
- Gradually initiate functional activities**

Post-Op 12-15 weeks

- 1) Aggressive strengthening program as tolerated by patient
  - Shoulder flexion
  - Shoulder abduction to 90°
  - ER/IR
  - Elbow flexors/extensor
  - Scapula muscles
- 2) Shoulder stabilization exercises below or at shoulder height
- 3) Dynamic open and closed-chain stabilization exercises for the scapula and shoulder

**Phase Four – Return to Activity Phase (Week 15-20)**

**Phase Four Goals:**

- Enhance muscular strength, power and endurance**
- Progress functional activities**
- Maintain shoulder mobility**

Post-Op 15-20 weeks

- 1) Continue with aggressive strengthening
  - Progression abduction strengthening to 120-140°
- 2) Initiate sport specific activity

**Phase Five: Return to Sports/Activity Phase (week 20)**

**Phase Five Goals:**

- Gradual return to sport activities**
- Maintain strength, mobility and stability**

Post-Op 20+ weeks

- 1) Continue with all strengthening exercises
- 2) Patient may start independent resistive exercise program at gym
- 3) Continue with sport specific activity
- 4) Return to work/sports activity