Rotator Cuff Repair Rehab Protocol Prescription

Patient Name: 
Date: 

Diagnosis: Rotator cuff tear 
Frequency: 2-3 visits/week 
Duration: 4 months

Weeks 1-4: Rest and Healing
Sling Immobilizer: At all times except exercises
HEP: 
- Distal ROM with scapular retraction
  - Manual scapular manipulation with patient lying on non-operative side
  - Supine passive FF in scapular plane to 120 deg
  - Supine passive ER to 30 deg

Weeks 4-6: Protective/Early Motion Phase
Sling Immobilizer: At all times except exercises (may d/c after 6 weeks)
PROM:
- Forward flexion in scapular plane - No limits
  - External rotation 45 deg
  - Internal rotation 30 deg

Therapeutic exercises: Codmans, wand exercises

Weeks 7-12: Early Strengthening Phase
PROM/AAROM: FF/ ER/ IR - Full
Therapeutic exercises: Cont wand exercises for ER/IR/FF
  - Flexibility, horizontal adduction (post capsule stretching)

Strengthening: RTC isotonic strengthening exercises
  - AROM: side-lying ER and supine FF in scapular plane
  - Progress to standing FF
  - ER/IR @ modified neutral w/ elastic bands
  - Progress to rhythmic stabilization exercises
  - Progress to closed chain exercises
Weeks 12+: Late Strengthening Phase

- Progress isotonic strengthening: periscapular and RTC musculature
  - Lat pull downs
  - Row machine
  - Chest press
- Flexibility: side-lying post capsule stretch
- Progress scapular stabilization program
- Initiate isokinetic strengthening (IR/ER) in scapular plane
- Begin light plyometrics at 16-18 weeks
- Individualize program to meet demands of sport specific requirements at 20-24 weeks
  
  Initiate throwing program for overhead athletes at 20-24 weeks

Concerns or questions:
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Physician Signature: