

Palmetto Health USC

ORTHOPEDIC CENTER

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ROTATOR CUFF REPAIR TYPE 2 (Medium 1.5-3.0cm)

Postoperative Management (unless advised by MD):

1. Sleep with sling for 4-6 weeks (optional after week 2)
2. No Active shoulder ROM until 8 weeks
3. No driving until off narcotics—automatic. No manual shift until 8 weeks for right shoulder
4. May remove pillow from sling at 4 weeks, D/C sling at 6 weeks

Post op Day 1 – 8 wks

1. Pendulums
2. Shrugs
3. Scapula retraction without resistance
4. PROM to tolerance
 - * Begin glenohumeral joint mobs at 3 weeks as needed
 - * Horizontal abduction and horizontal adduction for capsular mobility
5. Submaximal isometrics ER, IR, Flexion, Abduction
6. Body Blade: flex/ext and ER/IR at 4 weeks (rhythmic stabilization) at side
7. Bicep curls no weight
8. Cryotherapy
9. Rhythmic stabilization at 0 to 45 degrees (pain tolerant)

6 weeks – 8 weeks post op

1. Begin AAROM exercises with pulleys and wand
2. Begin light IR stretching and exercises to increase behind back and across back activities
3. Light resisted scapula retraction
4. Light resisted elbow flexion
5. Light resisted shrugs
6. Achieve full PROM all planes if not initiate gentle stretching to pain tolerance
7. Wall walks

8 weeks – 10 weeks

1. AROM at 8 weeks all planes
2. UBE at 8 weeks
3. Begin light strength exercises with thera-band and dumbbells when tolerated
 - *resisted scaption (full can), flexion and abduction to 90 degrees
4. Continue to progress resisted elbow flexion, shrugs and scapular retraction
5. Continue stretching and mobs if needed

12 weeks – 16 weeks

1. Progressive strength training of shoulder and scapular stabilizers
2. Thrower's 10 program, plyometric training, dynamic stabilization activities progressing towards overhead/athletic activities
3. 12 weeks may swing golf club and interval throwing program upon MD approval and completion of plyometric training
4. Instruct in HEP and prepare to D/C