

UCLA OUTPATIENT REHABILITATION SERVICES	
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Place label here	
NAME OF PATIENT: _____	
MRN: _____	

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Sports Medicine, Shoulder Surgery and Cartilage Restoration
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**ROTATOR CUFF REPAIR / SUB-ACROMIAL DECOMP. PHYSICAL THERAPY
PRESCRIPTION**

**Diagnosis: s/p (LEFT / RIGHT) Arthroscopic Rotator Cuff Repair / Sub-Acromial
Decompression**

Surgery Date: _____

Size of Tear: _____ cm Tissue Quality: EXCELLENT FAIR POOR

Concomitant Injuries / Pathology:

Surgical Techniques: Arthroscopic Mini – open

Tendons Repaired: Supraspinatus Subscapularis Infraspinatus Teres Minor

Additional Procedures: Subacromial Decompression AC Joint Resection
Biceps Tenodesis Biceps Tenotomy

PHASE 1: Initial Postop Period: WEEKS 0-4

Goals: Maintain repair integrity
Gradually increase PROM
Decrease pain & inflammation
Become independent with modified ADL's

Sling x 6 wks post-op; *Critical to emphasize to patient that no active motion is allowed until 6 wks*

Gentle passive supine forward elevation using the opposite hand. Passive ER to 20° with broom

handle; **No active External Rotation. No Internal Rotation.**

Modalities, cryocuff, prn Pts are instructed to ice or use cryocuff 30 min 4-5x / day for first 10-

14 days after surgery

Pendulum exercises; hand, wrist, elbow, PRE's; Deltoid isometrics

First 6 weeks is home program-based; visits are 1x / week until week 6, then 2x-3x / week

Pulley exercises incorporated at week 4, pending 110° of pain-free passive forward elevation, as

tolerated. Use cane for ER; towel to increase IR

PHASE 2: Motion Period: WEEKS 4-8

Goals: Maintain repair integrity

Full motion by week 8

Decrease pain & inflammation

Passive Supine ROM emphasizing Forward Elevation, Abduction, & External Rotation

Begin scapular strengthening program, in protective range

Re-establish normal scapulohumeral rhythm & full glenohumeral motion

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UCLA Department of Orthopaedic Surgery

PHASE 3: Advanced Motion & Early Strengthening Period: WEEKS 8-12

Goals: Preserve Motion

Gradually increase

Decrease pain & inflammation

Passive Supine ROM progressing to AAROM & AROM using weight of arm only, pain-free arc

only

AROM, AAROM for all shoulder exercises in impingement protocol

Only use 2 ounces to one pound weights; Start 20 repetitions with no weight

Patient should experience only minimal pain with exercises or later in day

Advance to 40 repetitions without weight; then, increase weight by 2-4 ounces as

tolerated by decrease repetitions back to 20 & slowly increase as tolerated to 40 repetitions

Advance process as tolerated with increasing weight but do not exceed 1 ½ pounds

Advance scapular strengthening program in protective range

Re-establish normal scapulohumeral rhythm, maintain full glenohumeral motion

PHASE 4: Advanced Motion Period: WEEKS 12-24

Goals: Return to work & sports without limits at 6 months post-operatively

Full AROM to pre-set limits

Emphasize Home Program:

- 7 days / week for stretching / ice
- 5 days / week for strengthening
-

Progress on rotator cuff exercises with 3 pound weight limit

Re-establish normal scapulohumeral rhythm, maintain full glenohumeral motion ROM activities, emphasize flexion. Gentle passive stretch to tolerance forward flexion & external rotation

Deltoid isotonic in plane of scapula, only after positive rotator cuff strength determined (esp. forward flexion)

Progress rotator cuff isotonic; Begin Theraband IR / ER week 16; Begin Biceps PRE's

Continue with aggressive peri-scapular strengthening exercises (rhomboids, serratus, latissimus, teres)

Begin Upper Extremity PRE's for large muscle groups at 20 weeks, i.e. pecs, lats, etc.

Begin isokinetic program at 20 weeks, IR / ER emphasize eccentrics; flexibility activities; modalities, prn

Treatment: _____ times per week **Duration:** _____ weeks ___ Home Program

**Please send progress notes.

Physician's Signature: _____ **Date:** _____

Kristofer J. Jones, M.D., Attending Orthopaedic Surgeon