Alexander E. Weber, MD

Sports Medicine Surgery

Team Physician USC Athletics and LA Kings

Appointments: 855-SC-SPORT

Office: 818-658-5921 Cellular: 518-928-8389 Email: weberae@usc.edu

Website: www.AlexWeberMD.com



## ARTHROSCOPIC ROTATOR CUFF REPAIR REHABILITATION PROTOCOL

|                            | RANGE OF MOTION  | IMMOBILIZER   | EXERCISES   |
|----------------------------|--|---|---|
| PHASE I<br>0-4 weeks       | <b>0-4 weeks</b> : None <b>4 weeks</b> : begin PROM  Limit 90° flexion, 45° ER,  20° extension, 45°  abduction, 45° ABER | 0-4 weeks: Immobilized at all times day and night Off for hygiene and gentle home exercise according to instruction sheets 4 weeks: Worn daytime only | O weeks: Elbow/wrist ROM, grip strengthening and pendulums at home only  Weeks: Begin PROM to ER to 45°  Codman's, posterior capsule mobilizations; avoid stretch of anterior capsule and extension  Closed chain scapula |
| PHASE II<br>4-12 weeks*    | Begin active/active-<br>assisted ROM<br>Advance to 140° FE, 135°<br>abduction, 90° ABER, 45°<br>ABIR                     | None  | Continue Phase I work; begin active-<br>assisted exercises, deltoid/rotator cuff<br>isometrics at 8 weeks<br>Begin resistive exercises for scapular<br>stabilizers, biceps, triceps and rotator<br>cuff**                 |
| PHASE III<br>12-16 weeks   | Gradual return to full AROM  | None  | Advance activities in Phase II; emphasize external rotation and latissimus eccentrics, glenohumeral stabilization  Begin muscle endurance activities (upper body ergometer)  Cycling/running as tolerated at 12 weeks     |
| PHASE IV 4-<br>6 months*** | Full and pain-free   | None  | Aggressive scapular stabilization and eccentric strengthening; scapular perturbation  Begin plyometric and throwing/racquet program, continue with endurance activities  Maintain ROM and flexibility                     |
| PHASE V<br>6-8 months      | Full and pain-free   | None  | Progress Phase IV activities, return to full activity as tolerated  |

<sup>\*</sup>If a distal clavicle excision is performed, horizontal adduction is restricted for 8 weeks post-op

<sup>\*\*</sup>If a biceps tenodesis is performed, avoid active flexion of biceps and eccentric loads on biceps for 6 weeks post-op

<sup>\*\*\*</sup>Limited return to sports activities during Phase IV if cleared by surgeon