



EXCEPTIONAL ORTHOPAEDIC CARE BEGINS HERE

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ROTATOR CUFF REPAIR PROTOCOL DELAYED REHAB

With or without SAD/Mumford

Days 1-42 (weeks 1-6)

- Patient may come to PT 1 visit for elbow, wrist, hand, and scapular AROM.

Days 43-56 (weeks 6-8)

- **Immobilization: Remain in sling with pillow for 6 weeks.**
- **Discharge pillow but remain in sling x 2 more weeks. Sling total of 8 weeks**
- **ROM: PROM to 90 degrees flexion and abduction, 20 degrees ER and IR.**
Include joint mobilization for glenohumeral and scapulothoracic joints
Pendulums, elbow, wrist, and hand AROM from HEP (if Pt performs correctly)

Days 57-70 (weeks 8-10)

- **PROM progress to full all motions**
- **AAROM**
Add in pulleys or stick exercises for ROM in clinic
May issue for home if patient is limited in ROM and has good understanding of passive nature of pulleys
Begin manually resisted scapular ex including scapular clock and self scapular squeeze focusing on middle and lower trap

Days 71-84 (weeks 10-12)

- **ROM: Continue with PROM as needed**
Progress to AAROM
Begin AROM in all planes and progress as tolerated
- **Strength: OK to begin submaximal isometrics and progress to low level isotonic as pain and AROM allow.**

Days 85-112 (weeks 12-16)

- **ROM:** Continue with stretching and other treatments needed for full AROM
- Progress Rockwoods and RTC strength exercises
 - Progress scapular stabilization ex in open and closed chain
 - Begin total arm strengthening
- **Strength:** Progress into higher level strengthening tasks
 - Begin endurance activities

Days 113 + (weeks 16 +)

- **Strength:** Continue to progress TAS increasing resistance as able
- **Throwing:** Can begin plyometric throwing and return to sport progression if strength goals met.

Progression within the time frames along with modality and exercise choice is left up to the discretion of the treating therapist. If you have any questions regarding this protocol, please contact (316) 219-8299.