

Rehabilitation Protocol for Rotator Cuff Repair-Small to Medium Sized Tears

This protocol is intended to guide clinicians and patients through the post-operative course of a rotator cuff repair. Specific interventions should be based on the needs of the individual and should consider exam findings and clinical decision making. If you have questions, contact the referring physician.

Considerations for the Post-operative Rotator Cuff Repair Rehabilitation Program

Many different factors influence the post-operative rotator cuff repair rehabilitation outcome, including rotator cuff tear size, type of repair, tissue quality, number of tendons involved, and individual patient factors like age and co-morbidities including increased BMI and diabetes. Consider taking a more conservative approach for more complex tears, including large/massive tears (>3 cm) and >1 tendon involvement.

Post-operative Complications

If you develop a fever, unresolving numbness/tingling, excessive drainage from the incision, uncontrolled pain or any other symptoms you have concerns about you should contact the referring physician.

PHASE I: IMMEDIATE POST-OP (0-3 WEEKS AFTER SURGERY)

Rehabilitation	Protect surgical repair							
Goals	Reduce swelling, minimize pain							
	Maintain UE ROM in elbow, hand and wrist							
	Gradually increase shoulder PROM							
	Minimize muscle inhibition							
	Patient education							
Sling	Neutral rotation							
	Use of abduction pillow in 30-45 degrees abduction							
	Use at night while sleeping							
Precautions	No shoulder AROM/AAROM							
	No lifting of objects							
	No supporting of body weight with hands							
	Avoid scapular retraction with a teres minor repair							
Intervention	Swelling Management							
	Ice, compression							
	Range of motion/Mobility							
	PROM: ER<20 scapular plane, Forward elevation <90, seated GH flexion table slide, horizontal table							
	<u>slide</u>							
	AROM: elbow, hand, wrist (PROM elbow flexion with concomitant biceps tenodesis/tenotomy)							
	AAROM: none							
	Strengthening (Week 2)							
	• Periscapular: scap retraction , prone scapular retraction , standing scapular setting , supported							
	scapular setting, inferior glide, low row							
	o *avoid with subscapularis repair and teres minor repair							
	Ball squeeze							
Criteria to	90 degrees shoulder PROM forward elevation							
Progress	• 20 degrees of shoulder PROM ER in the scapular plane							
	0 degrees of shoulder PROM IR in the scapular plane							
	Palpable muscle contraction felt in scapular and shoulder musculature							
	No complications with Phase I							

PHASE II: INTERMEDIATE POST-OP (4-6 WEEKS AFTER SURGERY)

Continue to protect surgical repair						
Reduce swelling, minimize pain						
Maintain shoulder PROM						
Minimize substitution patterns with AAROM						
Patient education						
Neutral rotation						
 Use of abduction pillow in 30-45 degrees abduction 						
Use at night while sleeping						
No lifting of objects						
No supporting of body weight with hands						
Range of motion/Mobility						
PROM: ER<20 scapular plane, Forward elevation <90						
AAROM: Active assistive shoulder flexion, shoulder flexion with cane, cane external rotation stretch.						
washcloth press, sidelying elevation to 90 degrees						
Strengthening						
Periscapular: Row on physioball, shoulder extension on physioball						
90 degrees shoulder PROM forward elevation						
• 20 degrees shoulder PROM ER in scapular plane						
• 0 degrees of shoulder PROM IR in the scapular plane						
Minimal substitution patterns with AAROM						
• Pain < 4/10						
No complications with Phase II						

PHASE III: INTERMEDIATE POST-OP CONTD (7-8 WEEKS AFTER SURGERY)

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Rehabilitation	Do not overstress healing tissue Dela dela dela dela dela dela dela dela d								
Goals	Reduce swelling, minimize pain								
	Gradually increase shoulder PROM/AAROM								
	Initiate shoulder AROM								
	Improve scapular muscle activation								
	Patient education								
Sling	Discontinue								
Precautions	No lifting of heavy objects (>10 lbs)								
Intervention	Range of motion/Mobility								
*Continue with	PROM: ER<30 scapular plane, Forward elevation <120								
Phase I-II	AAROM: seated shoulder elevation with cane, seated incline table slides, ball roll on wall								
interventions	• AROM: elevation < 120, supine flexion, salutes, supine punch, wall climbs								
	Strengthening								
	Periscapular**: Resistance band shoulder extension, resistance band seated rows, rowing, lawn								
	<u>mowers</u> , <u>robbery</u> , <u>serratus punches</u>								
	**Initiate scapular retraction/depression/protraction with subscapularis and teres minor repair								
	Elbow: <u>Biceps curl</u> , <u>resistance band bicep curls</u> and <u>triceps</u>								
Criteria to	120 degrees shoulder PROM forward elevation								
Progress	30 degrees shoulder PROM ER and IR in scapular plane								
	Minimal substitution patterns with AROM								
	• Pain < 4/10								

PHASE IV: TRANSITIONAL POST-OP (9-10 WEEKS AFTER SURGERY)

Rehabilitation	Do not overstress healing tissue				
Goals	Gradually increase shoulder PROM/AAROM/AROM				
	Improve dynamic shoulder stability				
	Progress periscapular strength				
	Gradually return to full functional activities				
Precautions	No lifting of heavy objects (> 10 lbs)				

Intervention	Range of motion/mobility								
*Continue with	PROM: ER<45 scapular plane, Forward elevation <155, ER @ 90 ABD < 60								
Phase II-III	AROM: supine forward elevation with elastic resistance to 90 deg, scaption and shoulder flexion to								
interventions	90 degrees elevation								
	Strengthening								
	• Periscapular: Push-up plus on knees, prone shoulder extension Is, resistance band forward punch,								
	forward punch, tripod, pointer								
Criteria to	155 degrees shoulder PROM forward elevation								
Progress									
	60 degrees shoulder PROM ER @ 90 ABD								
	120 degrees shoulder AROM elevation								
	Minimal to no substitution patterns with shoulder AROM								
	Performs all exercises demonstrating symmetric scapular mechanics								
	• Pain < 2/10								

PHASE V: TRANSITIONAL POST-OP CONTD (11-12 WEEKS AFTER SURGERY)

	,							
Rehabilitation	Restore full PROM and AROM							
Goals	Enhance functional use of upper extremity							
Intervention	Range of motion/mobility							
*Continue with	PROM: Full							
Phase II-IV	AROM: Full							
interventions	Stretching							
	• External rotation (90 degrees abduction), Hands behind head, IR behind back with towel, sidelying							
	horizontal ADD, sleeper stretch, triceps and lats, doorjam series							
Criteria to	Full pain-free PROM and AROM							
Progress	Minimal to no substitution patterns with shoulder AROM							
	Performs all exercises demonstrating symmetric scapular mechanics							
	• Pain < 2/10							

PHASE VI: STRENGTHENING POST-OP (13-16 WEEKS AFTER SURGERY)

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Rehabilitation	Maintain pain-free ROM Maintain pain-free ROM							
Goals	Initiate RTC strengthening (with clearance from MD)							
	Initiate motor control exercise							
	Enhance functional use of upper extremity							
Intervention	Strengthening							
*Continue with	 Rotator cuff: <u>internal external rotation isometrics</u>, <u>side-lying external rotation</u>, 							
Phase II-V	Standing external rotation w/resistance band, standing internal rotation w/resistance band,							
interventions	internal rotation, external rotation, sidelying ABD \rightarrow standing ABD							
	• Periscapular: <u>T and Y</u> , <u>"T" exercise</u> , <u>push-up plus knees extended</u> , <u>wall push up, "W" exercise</u> ,							
	resistance band Ws, dynamic hug, resistance band dynamic hug							
	<u>Biceps curl</u> (begin with concomitant biceps tenodesis/tenotomy)							
	Motor Control							
	 Internal and external rotation in scaption and Flex 90-125 (rhythmic stabilization) 							
	IR/ER and Flex 90-125 (rhythmic stabilization)							
	Quadruped alternating isometrics and ball stabilization on wall							
	• PNF – D1 diagonal lifts, PNF – D2 diagonal lifts							
	• Field goals							
Criteria to	Clearance from MD and ALL milestone criteria below have been met							
Progress	Full pain-free PROM and AROM							
	ER/IR strength minimum 85% of the uninvolved arm							
	ER/IR ratio 60% or higher							
	Negative impingement and instability signs							
	Performs all exercises demonstrating symmetric scapular mechanics							
	QuickDASH/PENN							

PHASE VII: EARLY RETURN-TO-SPORT (4-6 MONTHS AFTER SURGERY)

Maintain pain-free ROM								
Continue strengthening and motor control exercises								
Enhance functional use of upper extremity								
Gradual return to strenuous work/sport activity								
Strengthening								
Rotator cuff: External rotation at 90 degrees, internal rotation at 90 degrees, resistance band								
standing external rotation at 90 degrees, resistance band standing internal rotation at 90 degrees								
Motor control								
• Resistance band PNF pattern, PNF – D1 diagonal lifts w/ resistance, diagonal-up, diagonal-down								
Wall slides w/ resistance band								
See specific return-to-sport/throwing program (coordinate with physician)								
Last stage-no additional criteria								
• For the recreational or competitive athlete, return-to-sport decision making should be individualized and based upon factors including level of demand on the upper extremity, contact vs non-contact sport, frequency of participation, etc. We encourage close discussion with the referring surgeon prior to advancing to a return-to-sport rehabilitation program.								

Revised June 2020

Contact	Please email MGHSportsPhysicalTherapy@partners.org with questions specific to this protocol	

References

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Quíck DASH

Please rate your ability to do the following activities in the last week by circling the number below the appropriate response.

NO	MILD	MODERATE	SEVERE	UNABLE
DIFFICULTY	DIFFICULTY	DIFFICULTY	DIFFICULTY	
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
1	2	3	4	5
		DIFFICULTY DIFFICULTY 1 2 1 2 1 2 1 2 1 2 1 2	DIFFICULTY DIFFICULTY DIFFICULTY 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3	DIFFICULTY DIFFICULTY DIFFICULTY DIFFICULTY 1 2 3 4 1 2 3 4 1 2 3 4 1 2 3 4 1 2 3 4 1 2 3 4

	NOT AT ALL	SLIGHTLY	MODERATELY	QUITE A BIT	EXTREMELY
7. During the past week, to what extent has your					
arm, shoulder or hand problem interfered with	1	2	3	4	5
your normal social activities with family. friends,					
neighbours or groups?					
(circle number)					

	NOT LIMITED	SLIGHTLY	MODERATELY	VERY LIMITED	UNABLE
	AT ALL	LIMITED	LIMITED		
8. During the past week, were you limited in your	1	2	3	4	5
work or other regular daily activities as a result of					
your arm, shoulder or hand problem? (circle					
number)					
Places rate the soverity of the following					

Please rate the severity of the following					
symptoms in the last week (circle number)	NONE	MILD	MODERATE	SEVERE	EXTREME
9. Arm, shoulder or hand pain	1	2	3	4	5
10. Tingling (pins and needles) in your arm, shoulder or hand	1	2	3	4	5

shoulder or hand					
	NO	MILD	MODERATE	SEVERE	so мисн
	DIFFICULTY	DIFFICULTY	DIFFICULTY	DIFFICULTY	DIFFICULTY
					THAT I
					CAN'T SLEEP
11. During the past week, how much difficulty have					
you had sleeping because of the pain in your arm,	1	2	3	4	5

QμίckDASH DISABILITY/SYMPTOM SCORE = [(sum of n responses)-1] x 25 (where n is the number of completed responses)

A Quick DASH score may \underline{not} be calculated if there is greater than 1 missing item.

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shoulder or hand? (circle number)

Quick DASH

WORK MODULE (OPTIONAL)

The following questions ask about the impact of your arm, shoulder or hand problem on your ability to work (including home-making if that is your main work role).

Please indicate what your job / work is: ______

☐ I do not work (you may skip this section).

Please circle the number that best describes your physical ability in the past week.

	NO	MILD	MODERATE	SEVERE	UNABLE
Did you have any difficulty:		DIFFICULTY	DIFFICULTY	DIFFICULTY	
Doing your work in your usual way?					
	1	2	3	4	5
Doing your usual work because of arm,					
shoulder or hand pain?	1	2	3	4	5
Doing your work as well as you would like?					
	1	2	3	4	5
Spending your usual amount of time					
doing your work?	1	2	3	4	5
	Doing your work in your usual way? Doing your usual work because of arm, shoulder or hand pain? Doing your work as well as you would like? Spending your usual amount of time	pou have any difficulty: Doing your work in your usual way? 1 Doing your usual work because of arm, shoulder or hand pain? Doing your work as well as you would like? 1 Spending your usual amount of time	you have any difficulty: Doing your work in your usual way? 1 2 Doing your usual work because of arm, shoulder or hand pain? 1 2 Doing your work as well as you would like? 1 2 Spending your usual amount of time	you have any difficulty: Doing your work in your usual way? 1 2 3 Doing your usual work because of arm, shoulder or hand pain? 1 2 3 Doing your work as well as you would like? 1 2 3 Spending your usual amount of time	you have any difficulty: Doing your work in your usual way? 1 2 3 4 Doing your usual work because of arm, shoulder or hand pain? 1 2 3 4 Doing your work as well as you would like? 1 2 3 4 Spending your usual amount of time

SPORTS/PERFORMING ARTS MODULE (OPTIONAL)

The following questions relate to the impact of your arm, shoulder or hand problem on playing *your musical instrument or sport or both*. If you play more than one sport or instrument (or play both), please answer with respect to that activity which is most important to you.

Please indicate the sport or instrument which is most important to you: ___________________________

☐ I do not play a sport or an instrument. (You may skip this section).

Please circle the number that best describes your physical ability in the past week.

Did	you have an difficulty:	NO DIFFICULTY	MILD DIFFICULTY	MODERATE DIFFICULTY	SEVERE DIFFICULTY	UNABLE
1.	Playing your instrument or sport in your usual way?	1	2	3	4	5
2.	Playing your musical instrument or sport because of arm, shoulder or hand pain?	1	2	3	4	5
3.	Playing your instrument or sport as well as you would like?	1	2	3	4	5
4.	Spending your usual amount of time practising or playing your instrument or sport?	1	2	3	4	5

Scoring the optional modules: add up the assigned values for each response; divide by

4 (number of items); subtract 1; multiple by 25.

An optional module score may <u>not</u> be calculated if there are any missing items.

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The Penn Shoulder Score, Part 1: Pain and Satisfaction Subscales

Please circle the number closest to your level of pain or satisfaction								Office Use Only		
Pain at re	st w	ith yo	ur arı	m by	your :	side:				
0 No pain	1	2	3	4	5	6	7	8	9 10 Worst pain possible	(10 – # circled)
Pain with	nor	mal a	ctivitie	es (ea	ating,	dress	sing, t	athin	g):	
0 No pain	1	2	3	4	5	6	7	8	9 10 Worst pain possible	(10 – # circled) (Score 0 if not applicable)
Pain with	stre	nuou	c octi	vition	/roos	مماما	11.641		Line worlding	
i aiii wilii	0110	Huou	s acu	villes	(reac	ning,	litting	ı, pus	hing, pulling,	
	: 1	2	3	4	5	ening,	-	ı, pus 8	9 10 Worst pain possible	(10 – # circled) (Score 0 if not applicable)
throwing): 0	: 1				•		-		9 10 Worst pain	(Score 0 if not
throwing): 0 No pain How satis	: 1	2	3	4	5	6	7	8	9 10 Worst pain possible	(Score 0 if not applicable)
throwing): 0 No pain	: 1	2	3	4	5	6	7	8	9 10 Worst pain possible Pain score:	(Score 0 if not applicable)

The Penn Shoulder Score: Function Subscale

	ease circle the number that best describes the level f difficulty you might have performing each activity	No difficulty	Some difficulty	Much difficulty	Can't do at all	Did not do <u>before</u> injury
1.	Reach the small of your back to tuck in your shirt with your hand	3	2	1	0	X
2.	Wash the middle of your back/hook bra	3	2	1	0	X
3.	Perform necessary toileting activities	3	2	1	0	X
4.	Wash the back of opposite shoulder	3	2	1	0	X
5.	Comb hair	3	2	1	0	X
6.	Place hand behind head with elbow held straight out to the side	3	2	1	0	X
7.	Dress self (including put on coat and pull shirt off overhead	3	2	1	0	X
8.	Sleep on affected side	3	2	1	0	X
9.	Open a door with affected arm	3	2	1	0	X
10.	Carry a bag of groceries with affected arm	3	2	1	0	X
11.	Carry a briefcase/small suitcase with affected arm	3	2	1	0	X
12.	Place a soup can (1-2 lb) on a shelf at shoulder level without bending elbow	3	2	1	0	X
13.	Place a one gallon container (8-10 lb) on a shelf at shoulder level without bending elbow	3	2	1	0	X
14.	Reach a shelf above your head without bending your elbow	3	2	1	0	X
15.	Place a soup can (1-2 lb) on a shelf overhead without bending your elbow	3	2	1	0	X
16.	Place a one gallon container (8-10 lb) on a shelf overhead without bending your elbow	3	2	1	0	X
17.	Perform usual sport/hobby	3	2	1	0	X
18.	Perform household chores (cleaning, laundry, cooking)	3	2	1	0	X
19.	Throw overhand/swim/overhead racquet sports (circle all that apply to you)	3	2	1	0	X
20.	Work full-time at your regular job	3	2	1	0	Х

SCORING

Total of columns = ____ (a) Number of Xs \times 3 = ____ (b), 60 - ____ (b) = ____ (c) (if no Xs are circled, function score = total of columns) Function Score = ____ (a) \div ____ (c) = ____ \times 60 ____ /60