"Arthroscopic Rotator Cuff Repair"
Protocol Sequence

**Note:** Patients that have a rotator cuff repair performed arthroscopically tend to be less painful post-operatively than the patients that have an open repair. It is important to remember that time frame for healing of the repair does not change based on the method of repair. Therefore, despite patients decreased pain symptoms, initiation of AROM and strengthening should still be followed per protocol.

**Phase I:** Weeks 1-6
- CPM (if provided) per protocol
- Icing 10 minutes 2-3 times/day
- Sling for 6 weeks at all times except while bathing, dressing, and exercises
- No AROM for 6 weeks
- Keep area dry until MD follow-up for dressing change
- Return to desk work based on pain level and job duties
- E-stim for pain control as needed
- PROM 2-3x/week
- Hanging Codman's 3-4 times/day
- Elbow AROM
- Wrist/Hand/Finger AROM and strengthening
- Begin scar mobs once closed
- Wean from abductor pillow approx week 4 (if applicable)
- Begin AAROM at week 5
- Begin weaning from sling weeks 5-7 (sling at night and in public places)

**Phase II:** Weeks 7-8
- PROM should be near full
- Progress to GH AROM exercises week 7

**Phase III:** Weeks 9-12
- Pt should achieve full AROM in this stage
- No lifting or carrying objects until cleared
- Light strength training focusing on scapular stabilization

**Phase IV:** Months 4-5
- Review mechanics of shoulder in strengthening exercises, work, and sport
- Sport and work specific strengthening
- Progress strengthening, focusing on RTC endurance
- Initiate independent workout at health club or home gym
Phase V: Months 6+
Return to sports and/or manual labor work as tolerated
Progress independent workout in home gym
Minimal formal PT visits as needed
Consider work hardening if appropriate (consult MD)

*** Throwing to begin with MD clearance

*** If SLAP repair also performed, avoid ER past neutral x 6 weeks and proceed cautiously with ER @ 90 and resisted forward flexion