

## Rotator Cuff Repair (Massive or Revision)

### **Phase 1 – Maximum Protection**

#### **Weeks 0 to 6**

- Wear sling at all times for 6 weeks
- Avoid passive shoulder motion until week 4
- Avoid active motion of shoulder
- Avoid loaded elbow flexion
- Passive range of motion only
  - No motion for 4 weeks
  - Progressive PROM in all directions as tolerated
    - Avoid ER past 20 degrees if subscapularis repair

#### Goals:

- Reduce pain and inflammation
- Decrease pain
- Protect the surgical repair
- Postural education

#### Exercise Progression:

- Cervical ROM and basic deep neck flexor activation (chin tucks)
- Instruction on proper head, neck, and shoulder alignment
- Hand and wrist AROM
- Active shoulder retraction
- Passive scapular mobility
- Upper thoracic mobilization
- Pendulums
- Ice and modalities to reduce pain and inflammation

### **Phase 2 – Restoring Mobility, Function, and Active Range of Motion**

#### **Weeks 6-12**

- Discontinue sling
- Delay RC strengthening until 10 to 12 weeks
- Resume light ADLs (<2lbs), ensuring no heavy lifting, pushing, pulling, or repetitive reaching

#### Goals:

- Continued protection of repaired tissue, while slowly progressing to full active range of motion

- Full PROM in all planes
- No compensatory arm elevation strategies (e.g. no shoulder shrug with reaching)

Exercise Progression:

- Progress from AAROM to AROM when adequate strength and motor control
- Start strengthening when full AROM is achieved (progress slowly)
- Avoid loaded RC strengthening in overhead positions until 12 weeks
- Dynamic stabilization exercises with light perturbation isometrics
- Progress to higher intensity cardio training (avoid running)
- Begin light bicep loading between 8 to 12 weeks, progress slowly

**Phase 3 – Advanced Strengthening and Proprioception**

**Weeks 12 to 20**

Goals:

- Progressive strengthening and endurance training
- Introduction of sport-specific drills (avoid participation in sport until cleared by surgeon)

Exercise Progression:

- Begin strengthening at or above 90 degrees with prone and/or standing YTI
- Initiate light bench press and shoulder press (pain free)
- Closed chain perturbations training, plank progression, etc
- Push-up progression (counter height -> knee height -> floor)

Criteria for return to play:

- Full, pain-free range of motion
- Normal glenohumeral and scapulothoracic arthrokinematics
- >90% MMT using handheld dynamometer