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Orthopedics & Sports Medicine  
4 West Street  
West Hatfield, MA 01088

## POST-OPERATIVE ANTHROSCOPIC ROTATOR CUFF PROTOCOL

### **Phase I (weeks 1-6): Immediate Post Surgical**

#### **Goals:**

1. Maintain/protect integrity of the repair.
2. Decrease pain and inflammation.
3. Achieve independence in ADLs with modification.

#### **Precautions:**

1. Maintain arm in sling as instructed by physician.
2. Do not lift arm away from the body.
3. Do not lift objects.
4. Do not reach arm behind your back
5. Do not make sudden movements of, or lean on, the arm.
6. Keep incision clean and dry.
7. Do not pull on objects or pull your body weight.

#### **Physical therapy (generally will begin 10-14 days after surgery)**

1. Pendulum exercises
2. Active motion of hand, wrist and elbow, with elbow against your side
3. Cold to control pain and swelling
4. E stim as needed for pain control
5. Passive ROM in supine (goal 90 degrees initially, then to 125 degrees)
6. External rotation to neutral
7. Internal rotation to 75
8. No abduction
9. Pulleys only if patient can keep them passive
10. May do stationary bike or walking with arm in sling

### **Phase II (weeks 5-10): Protection/Active Motion**

#### **Goals:**

1. Allow soft tissue healing.
2. Do not overstress healing tissue.
3. Gradually restore full passive range of motion (PROM) -- weeks 4 and 5.
4. Decrease pain and inflammation.



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**Precautions:**

1. No lifting
2. No supporting body weight by hands and arms
3. NO sudden motions of the arm
4. No excessive reaching behind your back
5. No upper extremity bike

**Physical therapy (weeks 5 and 6):**

1. Continue sling/brace as instructed by physician (usually week 6).
2. Start AA flexion in supine.
3. Continue progressive PROM until full ROM (weeks 4-5).
4. Practice gentle scapular and GH joint mobilization to regain full PROM.
5. Continue cryotherapy (always after exercise and activity).

**Physical therapy (weeks 6-8):**

1. Continue AROM and AAROM exercises.
2. Begin RTC isometrics week 7-8.
3. Initiate AROM exercises week 6 -- include: flexion, abduction, ER, IR.

**Phase III (weeks 10-14): Early Strengthening**

**Goals:**

1. Full AROM (weeks 10-14)
2. Gradual restoration of shoulder strength and power
3. Gradual return of functional activities

**Precautions:**

1. No heavy lifting
2. No sudden lifting or pushing activities
3. No overhead lifting

**Physical therapy (week 10)**

1. Continue stretching and PROM as needed
2. Dynamic stabilization exercises
3. Initiate strengthening
  - ER/IR with t-band
  - ER in side-lying
  - Lateral raises



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- Full can scapular plane
- Prone rowing
- Prone horizontal abduction
- Prone extension
- Elbow flexion
- Elbow extension

\*Patient must be able to elevate arm without shoulder or scapular hiking before initiating isotonic exercises.

**Physical therapy (week 12):**

Continue all exercises listed above and progress to functional shoulder exercises.

**Phase IV: Advanced Strengthening**

**Goals:**

1. Maintain full non-painful AROM.
2. Advance conditioning exercises for enhanced functional use.
3. Improve muscular strength and power.
4. Gradually return to functional activities.

**Physical therapy:**

1. Continue to maintain full AROM.
2. Continue progression of strengthening.
3. Advance proprioceptive and neuromuscular activities.
4. Initiate sport specifics if OK with physician.