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GENERAL GUIDELINES FOR PHYSICAL THERAPY ROTATOR CUFF REPAIR

THERAPISTS: PLEASE MODIFY AT YOUR DISCRETION

1 TO 4 WEEKS POST-SURGERY

1. **Wear immobilizer 24 hrs./day until you are 4 weeks postop. At that point, sleep in the sling for the next 2 weeks until 6 weeks postop.**
2. Use of modalities as needed (heat, ice, electrotherapy)
3. Continue passive range-of-motion exercises – active-assistive (wall climbs, wand) and active ROM exercises may be added
4. Add joint mobilization as needed
5. Isometric exercises – internal/external rotation, abduction, flexion, extension
6. Active internal/external rotation exercises with rubber/surgical tubing (as tolerated)
7. Active shoulder extension lying prone or standing (bending at the waist) – avoid the shoulder extended position by preventing arm movement beyond the plane of the body
8. Active horizontal adduction (supine) as tolerated

4 to 8 WEEKS POST-SURGERY No Active Elevation/Abduction until 6 WEEKS

1. Continue shoulder ROM exercises (passive, active-assistive) as needed
2. Continue active internal/external rotation exercises with rubber tubing – as strength improves, progress to free weights
External Rotation: is performed lying prone with arm abducted to 90° or side-lying with the arm at the side – perform movement through available range
Internal Rotation: is performed supine with the arm at the side and elbow flexed at 90°
3. Active shoulder abduction from 0° - 90° at **6 weeks.**

4. **6 Weeks** : Add supraspinatus strengthening exercise, if adequate ROM is available (0° - 90°) – the movement should be pain free and performed in the scapular plane (approximately 20° - 30° forward of the coronal plane)
5. **6 Weeks** : Active shoulder flexion through available range-of-motion (as tolerated)



2 TO 3 MONTHS POST-SURGERY

1. Continue shoulder ROM exercises (as needed) – patient should have full passive and active ROM
2. Continue isotonic exercises with emphasis on eccentric strengthening of the rotator cuff
3. Add push-ups – movement should be pain free – begin with wall push-ups – as strength improves, progress to floor push-ups (modified – hands and knees, or military – hands and feet) as tolerated
4. Add shoulder bar hang exercise to increase ROM in shoulder flexion and abduction (as needed)
5. Active horizontal abduction (prone)
6. Add strengthening exercises to the elbow and wrist joint (as necessary)
7. Upper extremity PNF patterns may be added – shoulder flexion/abduction/external rotation and extension/adduction/internal rotation diagonals are emphasized
8. Add upper body ergometer for endurance training
9. Add gentle Plyometrics

4 MONTHS POST-SURGERY

1. Add advanced capsule stretches, as necessary
2. Continue to progress isotonic exercises
3. Add military press exercise
4. Add progressive Plyometrics including stair-stepper and tilt board
5. Add pitch-back beginning with a light ball
6. Add total body conditioning program

5 MONTHS POST-SURGERY

1. Continue strengthening program – emphasis may be placed on exercising the shoulder in positions specific to the sport
2. Continue total body conditioning program with emphasis on the shoulder (rotator cuff)
3. Skill mastery – begin practicing skills specific to the activity (work, recreational activity, sports, etc.) – *for example, throwing athletes (e.g., pitchers) may proceed to throwing program*

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4. May add progressive shoulder throwing program – advance through the throwing sequence, as needed