



Arthroscopic Tier 2 Rotator Cuff Repair
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| | PRECAUTIONS | ROM | EXERCISES |
|--|---|---|--|
| Phase 1: 0-2 weeks HEP only | Sling with bolster at all times except hygiene No use of the arm No driving | No shoulder motion | AROM of the neck, hand/grip, wrist, and elbow **avoid active elbow flexion x 4-6 weeks if biceps tenodesis or tenotomy. Perform active-assisted elbow motion instead** |
| Phase 2: 2-6 weeks Formal therapy to begin 2 weeks post-op, 2-3x/week | Sling at all times when up and moving. Can begin driving (in sling) Can remove bolster @ week 4 D/C sling @ week 6 1# ADL restriction | Gentle PROM in scapular plane It is passive motion, NOT STRETCHING ER to 60 FLexion to 140 IR avoiding pain. | provide passive shoulder range of motion Wrist (supported) PRE's with light weight; Elbow AROM; Grip Supine wand External rotation PROM (if no subscapularis repair) Scapular Isometrics Codman's pendulum exercises 3 x/day |
| Phase 3: 6-8 weeks 2x/week | No sling No actively raising arm but use for light ADL's, IADL's | Full PROM in all planes Gentle Joint mobs as needed Begin AAROM, without upper trap hiking | Active-assisted range of motion: Pulleys, supine wand flexion; "wand-ranger" to 90°; wall crawl UBE - No resistance Begin submaximal shoulder isometrics for IR/ER/Ext. Elbow PRE's (arm at side) Scapular stabilization exercises |
| Phase 4: 8-12 weeks 1-2x/week | | Begin AROM, without upper trap hiking Perform stretching for full PROM | standing wand flexion/abduction Sidelying AROM: ER and Abduction Short lever isotonic IR/ER (cable, theraband) Prone Scapular "I", "T", "Y" Do not push active motion through shoulder shrug sign |
| Phase 5: 12-24 weeks | MD will determine weight restrictions | Full AROM in week 16 - 20 | Long-lever strengthening, PNF patterns, body blade, wall push-ups, HEP Continue stretching |
| 6-8 months and beyond | MD will determine activity restrictions | | Continue gross strengthening, advanced strengthening Work-specific tasks and strengthening Sports specific training, interval throwing |

MD post-op appts: 2 weeks, 6 weeks, 12 weeks, 5 months. Please send PT progress notes prior to each one. This protocol is not a substitute for clinical decision making of the health care professional.
Please see PT referral for any specific post op instructions; Confirm the extent of the tendon repair prior to therapy! (biceps tenodesis, etc)