This protocol is designed to serve as a patient rehabilitation guide following a standard rotator cuff repair procedure. Time frames allow for optimal healing and should be used as criteria for advancement along with a patient’s functional ability.

Phase I (weeks 0-4)

Goals
1. Decrease pain
2. Protect repair; educate patient regarding rotator cuff repair precautions
3. Full passive range of motion in all directions with the exception of internal rotations
4. Independent with home exercises
5. Initiate scapular awareness exercises

Precautions
1. Wear sling at all times for four weeks except during therapy/home exercise program
2. No active abduction or external rotation for six weeks
3. No passive internal rotation stretching for four weeks

Exercises
1. Passive range of motion for flexion, scaption and external rotation
2. Grade II, III glenohumeral mobilizations anterior, inferior and posterior directions
3. Manual scapular resistance exercises
4. Codman’s all directions
5. Active elbow flexion and extension
6. Gripping exercise for the hand
7. Cervical active range of motion, all directions
8. Educate family on performing passive range of motion at home as appropriate
9. Modalities as needed for pain

Phase II (weeks 4-8)

Goals
1. Decrease pain
2. Full passive range of motion, all directions
3. Initiate active range of motion with patient aware of upper trapezius substitution pattern

Precautions
1. No resisted abduction or external rotation for six weeks post-op
2. When strengthening is initiated, use exercise bands only for the first four weeks (no free weights)
3. Avoid abnormal scapular substitution patterns with initiation of active motion

Exercises (weeks 4-6)
Note: Use only the theraband for strengthening, no weights
1. Continue passive range of motion and initiate active assistive range of motion for flexion, abduction, external rotation and internal rotation
2. Scapular strengthening exercises (with bands)
3. Band resistive exercises for biceps and triceps
4. Band resistive exercises internal rotation and extension
5. Continue to maintain cervical active range of motion, all directions
6. Perform lower extremity strengthening and cardiovascular exercises that are non-stressful to the shoulder
7. Trunk stabilization exercises

**Exercises (weeks 6-8)**

*Note: Use only the theraband for strengthening, no weights*

1. Initiate band resisted exercises for external rotation and abduction
2. Perform active range of motion for flexion and scaption with emphasis on scapular awareness to minimize the upper trap influence
3. Initiate light resistance exercises in all scapular planes

**Phase III (weeks 8-12)**

**Goals**

1. Full active range of motion in all planes
2. Minimal to no shoulder pain with activities of daily life
3. Improved rotator cuff and scapulothoracic strength
4. Normal scapulohumeral rhythm with active motions

**Exercises**

1. Continue passive range of motion and joint mobilization as needed
2. Continue strengthening of deltoid, cuff and scapulothoracic musculature
3. Initiate proprioceptive training
4. Initiate closed chain exercises
5. Initiate active proprioceptive neuromuscular facilitation (PNF) patterns concentrating on technique with gradual progression to resistive PNF patterns
6. Trunk stabilization/strengthening

**Phase IV (weeks 12-20)**

**Goals**

1. Normal strength, endurance and power
2. Return to full activities of daily life and recreational activities

**Exercises**

1. Stretching as needed
2. Continue rotator cuff and scapulothoracic strengthening with following progression:
   a. Prone scapular program
   b. Integrate functional patterns
   c. Increase speed of movements
   d. Integrate kinesthetic awareness drills into strengthening program
   e. Progress closed chain dynamic stability activities
3. Continue trunk and lower extremity strengthening

*Note: At four months may begin tennis ground stroke/batting/return to golf program if sufficient strength exists.
Phase V (weeks 20-32)

Goals

1. Return to normal activity without restriction

Exercises

1. Stretching as needed
2. Continue rotator cuff, scapulothoracic and trunk strengthening program
3. Plyoletic medicine ball program
4. Initiate throwing program
5. Initiate progressive replication of demanding activities of daily life/work activities