



ARTHROSCOPIC SHOULDER SURGERY REHABILITATION PROTOCOL

ROTATOR CUFF REPAIR



GENERAL GUIDELINES

- The local anesthetic (similar to novacaine) in your shoulder will last 6-12 hours
 - Start taking the pain medication as soon as you start feeling pain
- Vistaril may be taken every 6 hours as needed for nausea, itching, or trouble sleeping
- Use cryotherapy continuously for the first 72 hours, then as-needed thereafter
 - Ensure that the cryotherapy cuff never contacts the skin directly
 - Apply to the shoulder after performing rehab exercises for the first 12 weeks
- Remove the bandage 72 hours after surgery, but leave the white steristrips on the skin
 - Apply fresh gauze pad or bandaid to any incision that is moist or weeping
- You may shower after dressing removal as long as the incisions/steristrips are dry
 - All incisions must be completely dry for 24 hours before getting wet in shower
 - Do NOT submerge the shoulder underwater for the first 6 weeks
- The sling is for comfort and to protect the repair.
 - Wear the sling for the first 6 weeks, removing it for exercises and showers
 - Wear the sling when out of the house for the first 8 weeks
- Schedule a follow-up appointment for two weeks after surgery 410-448-6400

PHASE I

Begins immediately post-op through the first postoperative visit (2 weeks)

Goals:

- Protect the shoulder and minimize inflammation
- Ensure skin healing
- Initiate early range of motion

Sling:

- Wear the sling full-time, removing only for shower and exercises
- May type or write in the sling.
- No holding or carrying anything heavier than a pen/pencil

Therapeutic Exercises (remove sling to perform 2 times per day):

- *Pendulums.* Start the day after surgery. Bend over at the waist, let the elbow straighten, and let the arm gently sway. Use your body to generate momentum for the arm to sway rather than using the muscles of the operated shoulder/arm. This is the safest position to wash under the armpit.
- *External rotation stretching.* Use the uninvolved arm to passively rotate the hand/arm on the surgical side to the outside (away from the belly).

PHASE II

Begins 2 weeks postoperatively and extends to 6 weeks postoperatively

Goals:

- Protect the shoulder and the repair
- Regain range of motion

Sling:

- Wear the sling full-time, removing only for shower and exercises
- May type or write in the sling.
- No holding/carrying anything heavier than a pen/pencil

Therapeutic Exercises (3 times per day):

- *Pendulums*
- *Supine passive forward elevation stretching.*
- *External rotation stretching*
- *Scapular retractions*

PHASE III

Begins 6 weeks postoperatively and extends to 12 weeks postoperatively

Goals:

- Protect the repair
- Maximize range of motion
- Initiate active range of motion while minimizing inflammation

Sling:

- Discontinue the sling at home after 6 weeks
- Wear the sling outside of the home for the first 8 weeks

Activities:

- No lifting or carrying anything heavier than a cup of coffee or can of soda
- No reaching away from your body without assistance from the other arm

Therapeutic Exercises (3 times per day):

- All exercises from Phase II daily
- *Wall-climb and/or pulley assisted elevation in scapular plane*
- *Behind-the-back internal rotation*
- *Supported active shoulder rotation*
- *Supine cross-body stretch*
- *Hands-behind-head stretch* (start 7 weeks postoperatively if SLAP repair)
- Active prone elevations (forward, scapular-plane, lateral/abduction, extension)
- NO weights, resistance, or theraband strengthening

PHASE IV

Begins 12 weeks postoperatively until 18 weeks postoperatively

Criteria for advancement to Phase IV:

- Full, painless range of motion

Activities:

- No holding or carrying anything heavier than 5 pounds
- No lifting anything heavier than 1 pound away from your body

Goals:

- Initiate early functional strengthening
- Protect the repair

Therapeutic Exercises (stretching every day, strengthening every other day):

- All exercises from Phase III
- Stretching in all planes
- *Theraband internal* and *external* rotation in shoulder adduction (arm at the side)

PHASE V

Begins 18 weeks postoperatively

Goals:

- Maximize functional strength

Therapeutic Exercises:

- All exercises from Phase III
- Theraband and progressive dynamic strengthening

RETURN TO SPORT

Requires clearance from physician

Sport training/practice once shoulder at 90% of uninvolved side

- Start with 'walk-through' at < 1% of maximum effort
- Increase 10% effort each session as tolerated

Goal of return to full participation in contact sports at 7 months

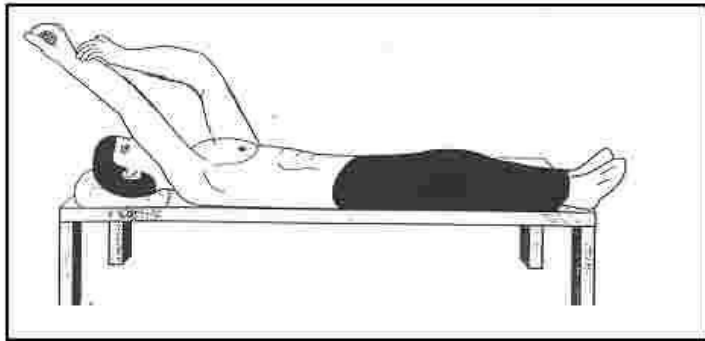
Selected Exercise Diagrams (Phase 1 and 2)



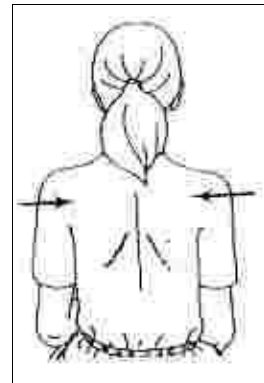
Pendulums



External rotation stretching

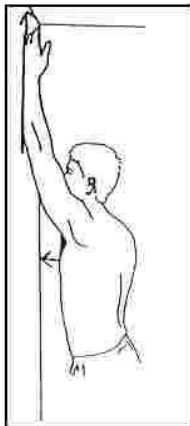


Supine active-assisted forward elevation stretching



Scapular retractions

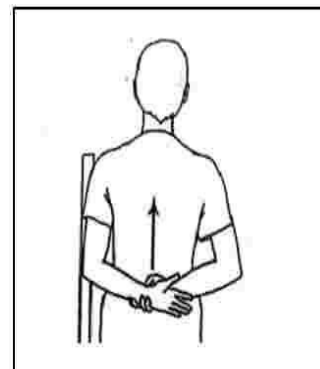
Selected Exercise Diagrams (Phase 3)



Wall climb

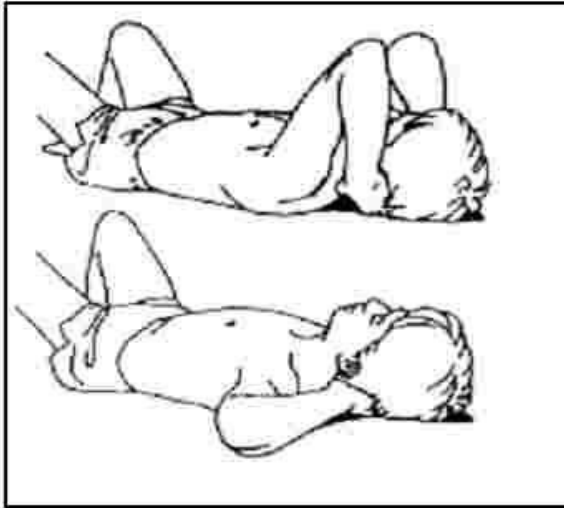


Supported active shoulder rotation



Behind-the-back stretching

Selected Exercise Diagrams (Phase 3)

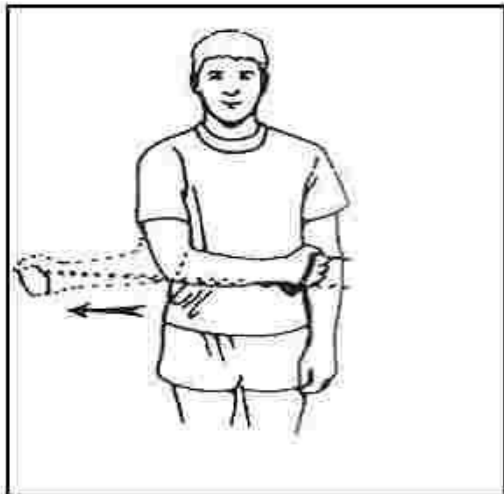


Hands-behind-head stretch
External rotation stretching in abduction/elevation

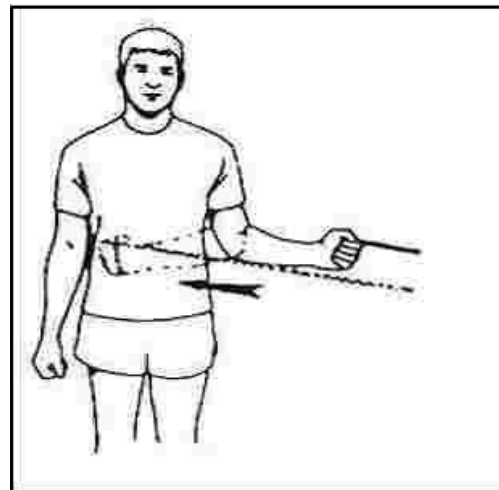


Cross-body stretching

Selected Exercise Diagrams (Phase 4)



Theraband external rotation



Theraband internal rotation