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THERAPY PROTOCOL FOR SHOULDER ARTHROSCOPY WITH ROTATOR CUFF REPAIR

Note: While this is intended to be a guide, please tailor progression to the patient's surgical procedure and response to treatment. The diagnosis, the surgery performed, and the patient's pre-operative level all play important roles in the post-operative period. This protocol is a general timeline, and can be accelerated or decelerated according to each individual situation. The protocol is NOT intended to be a comprehensive outline of all activities and restrictions.

This therapy protocol is intended for current patients of Dr. Hansen who are actively under his care. Dr. Hansen reserves the right to change all or part of this protocol based on individual patient progress. Please contact our office if you have questions or concerns.

Thank you for your care of our shared patient!

Frequency: 2-3 times per week for 12 weeks

General Information:

- Surgery may also include one or more of the following:
 - Subacromial decompression & acromioplasty, subcoracoid decompression & coracoplasty, AC joint resection
 - Capsule release
 - Biceps tenodesis
- Emphasis on early ROM to prevent contracture

1) Phase 1: Weeks 0-3

Goals: Decrease soreness and swelling, gently increase passive range of motion to tolerance, inhibit further muscle atrophy

- a) Precautions
 - i) Use sling night and day for 6 weeks WITH ABDUCTION PILLOW
 - ii) No lifting, pushing, pulling or carrying surgical arm
 - iii) No AROM biceps to protect biceps if tendon repair/tenodesis was performed

- b) Day of surgery:
 - i) Pendulums
 - ii) PROM elbow
 - iii) AROM wrist/hand
 - iv) Cold therapy
- c) Weeks 0-3
 - i) PROM only as tolerated
 - (1) IR to 45 degrees
 - (2) ER to 45 degrees
 - (3) Flexion to 120 degrees

2) Phase 2: Weeks 4-6

Goal: Advance PROM

- a) Precautions
 - i) Use sling night and day for 6 weeks WITH ABDUCTION PILLOW
 - ii) No lifting, pushing, pulling or carrying surgical arm
 - iii) If biceps tendon repair, no active flexion until 6+ weeks postop
- b) Weeks 4-6
 - i) PROM as tolerated
 - (1) Full ER, Flexion
 - (2) IR to 45 degrees

3) Phase 3: Weeks 7-8

Goal: Advance AROM

- a) Precautions
 - i) Discontinue sling at 6 weeks
 - ii) No lifting, pushing, pulling or carrying surgical arm
- b) Weeks 7-8
 - i) Advance AAROM and AROM as tolerated

4) Phase 4: Weeks 9-12

Goals: Full AROM, initiate strengthening

- a) Precautions
 - i) No lifting >5 lbs
- b) Weeks 9-11:
 - i) Goal of full AROM
- c) Week 10-12:
 - i) Gradual advancement of strengthening if full AROM achieved

5) Phase 5: Weeks 12+

Most patients will complete therapy between weeks 12-16 in favor of a home program

- a) Weeks 12-16:
 - i) Gradual strengthening & work hardening

Guide to advance activity (as tolerated and pending surgeon approval):

- 3 weeks: sedentary work
- 6-8 weeks: driving if small tear
- 10-12 weeks: driving if large tear
- 3-4 months: manual job, advance sport specific activities
- 4+ months: advance activity as tolerated, initiate golf advancement