

Dr. Brad Bushnell
Harbin Clinic Orthopaedic Surgery and Sports Medicine
Physical Therapy
Rotator Cuff Repair Massive
With or Without Biceps Release
Post Operative Protocol

Phase I – Maximum Protection (Week 0 to 4):

0 to 2 weeks:

- Abduction pillow
- Ace wrap hand to shoulder x 2 weeks with biceps release
- Ice and modalities to reduce pain and inflammation
- Active hand and wrist range of motion (ball squeeze)
- Passive elbow motion x 6 weeks
- Active shoulder retraction

2 to 4 weeks:

- Passive range of motion (Gradual Progression)
 - Passive Flexion to 90° above Pillow with **maximal Internal Rotation**
 - No External Rotation
 - Avoid internal rotation until 6 weeks post-operative
- Ice and modalities to reduce pain and inflammation
- Active hand and wrist range of motion

Phase II – Progressive Stretching and Active Motion (Weeks 6 to 10):

- Patient may be in ultra-sling for an additional two weeks
- Initiate end range of motion stretching as tolerated all planes
- Active range of motion shoulder and elbow
- Scapular strengthening
- Submaximal rotator cuff isometrics at 8-10 weeks as tolerated
- Biceps and triceps strengthening 8-10 weeks
- Proprioception drills emphasizing neuromuscular control

Phase III – Strengthening Phase (Weeks 10 to 12)

- Resisted rotator cuff and scapular stabilization program
- Proprioception and neuromuscular control drills

Phase IV – Advanced Strengthening and Plyometric Drills (Week 12 to 20):

- Continue with end range stretching
- Gym strengthening program as tolerated
- Progressive closed kinetic chain program as tolerated
- Initiate plyometric ball drills

Phase V – Interval sports program (Weeks 20 to 24):

- Follow-up Examination with the physician for medical release
- Range of motion and MMT