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Post-operative Rehabilitation Protocol

Open Rotator Cuff Repair with Pectoralis Major Tendon Transfer

Phase I – Early post-surgical phase (0-6 weeks)

Goals

- Protection of surgical repair
- Reduction of inflammation and pain
- Wear sling immobilizer until post-op week 6

Patient education/precautions

- No AROM of shoulder
- No aggressive and painful PROM or stretching

Activity

- Passive forward elevation to 90 degrees (post-op week 1-4), progress to full (post-op week 4-6)
- Passive IR/ER to neutral with arm at side (post-op week 1-4), progress to 45 degrees in scapular plane
- Avoid pendulum exercises and wand exercise (weeks 1-4), may initiate AAROM flexion in supine at week 5
- Scapular mobilization/strengthening
- Initiate sub-maximal deltoids and IR/ER isometrics with arm at side (week 5)
- Ice/cryotherapy for pain and inflammation control
- Elbow/wrist/hand AROM

Criteria for progression to Phase II

- PROM flexion to 90-100 degrees
- PROM Internal and External rotation in scapular plane to at least 45 degrees
- PROM abduction to at least 90 degrees in scapular plane

Phase II – Protection phase (6-10 weeks)

Goals

- Gradual restoration of full PROM
- Decrease/minimize pain and inflammation
- Do not overstress healing tissue

Activity

- Discontinue use of sling/immobilizer at week 6
- Progress PROM to full ROM (pain free)
- Scapular/glenohumeral joint mobilizations as indicated to restore ROM
- AAROM (wand exercise progression) progress to AROM in scapular plane
- Ice/cryotherapy for pain and inflammation control
- Progress scapular strengthening program

Criteria for progression to Phase III

- Full AROM

Phase III – Strengthening Phase (10-14 weeks)

Goals

- Full AROM and maintenance of full PROM
- Dynamic shoulder stability with gradual restoration of strength, power, and endurance
- Gradual return to functional activities

Activity

- Continue with stretching and PROM as needed
- Dynamic stabilization and strengthening program (prone rowing, prone horizontal abduction, “full-can”, etc)
Note: Patient must be able to elevate arm without shoulder or scapular hiking prior to initiating isotonic.
- Initiate functional activities

Criteria to for progression to Phase IV

- Able to tolerate progression to low-level functional activities
- Return of strength/dynamic shoulder stability
- Adequate strength and dynamic stability to progress to higher work/sport specific activities

Phase IV – Advanced Strengthening Phase/Return to activity phase (14 + weeks)

Goals

- Maintenance of full, pain free AROM
- Improve muscular strength, power, and endurance
- Gradual return to full functional activities

Activities

- Continue ROM and capsular stretching for ROM maintenance
- Continue strength progression
- Advance proprioceptive/neuromuscular activities
- Initiate plyometrics
- Gradual return to strenuous work, recreational, or sports activities