

Dr. Franky Davis
Sterling Center Orthopedics 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