

REHABILITATION GUIDELINES

ATHROSCOPIC RTC REPAIR/RECONSTRUCTION FOR SMALL/MEDIUM TEAR

(not subscapularis)

Sling immobilizer for 4 weeks- including sleep

PHASE 1: 0-4 WEEKS

Strictly Passive range of motion (ROM); pendulums to warm up

-Scapular isometrics

- Begin Phase I in the supine position for elevation and external rotation, and progress to upright

- Start internal rotation behind back at post op day (POD) #29

-Elbow, wrist and hand active ROM

-Pulleys ok

PHASE 2: BEGIN WEEK 5

-Discontinue sling

- Active range of motion to full all planes. Avoid impingement positions

- Light activities of daily living ok (e.g. grooming, feeding)

- No lift greater than 1 pound with operative arm until 2 months PO

- When Phase II is initiated, return to supine for elevation and progress to upright

- Light terminal stretching

- Isometric strength (<u>except</u> supraspinatus) with arm at side: begin six weeks post op

-Scapular stabilization

PHASE 3: 8 WEEKS POST-OP

- Theraband resisted strengthening- 15 or more reps to fatigue to progress to next band; 3 sets BID minimum; Emphasize entire rotator cuff and scap stabilizers -Light weights OK at least 10 wks post-op <u>after progressing</u> well with stiffest theraband

-Terminal Stretching

Three months post op

- Late terminal stretching

-Progressive strength training &/or work hardening

- All activity below shoulder level OK

WEIGHT TRAINING PROGRAM

No long lever-arm exercises No impingement positions DATE:

DATE:

DOS:



Dr. Levene

No overhead strengthening until Fourth post op month RETURN TO ACTIVITIES

Ski 4 months
Golf 4 months/ chip and putt at 2-3 months
Tennis 4 months (except overhead serve)
Contact Sports 6 months
Heavy labor/lift 4 months