

Rotator Cuff Repair (Small-Medium) Rehabilitation Protocol

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Patient: _____ **DOS:** _____

Surgeon Parameters

PROM limit — Flexion _____°	PROM limit — Abduction _____°	PROM limit — External Rotation _____°
Sling + PROM limitation duration _____ wks	AROM initiation _____ wks	Strengthening initiation _____ wks
Biceps Tenodesis: ☐ Subscapularis Repair: ☐	No resisted elbow flexion for _____ wks	Additional External Rotation limits _____
Other Precautions:		

Parameters above are patient-specific and supersede the general timeframes below. In general, PROM limitations end in conjunction with sling discontinuation. Therapist to use clinical judgment to individualize exercise selection and pace within each phase.

Phase	Goals	Precautions	Treatment Focus
Phase 1 Weeks 0–6	Goals - Protect repair; control pain/swelling - Prevent stiffness - Maintain elbow/wrist/hand mobility - Initiate scapular awareness	Precautions - Sling per parameters above - No active lifting/reaching with operative arm - No PROM beyond limits above; avoid combined ER + abduction - Limit ER if concurrent subscap repair If Biceps tenodesis: no resisted elbow flexion/supination; no lifting with elbow extended	Treatment Focus - Pendulums 2x/day - Therapist PROM (flexion, ER, abduction) to limits above, 3x/wk - Scapular retraction/protraction isometrics; supported vs sling-on - AROM elbow/wrist/hand daily - Ice/modalities PRN pain-swelling
► Advance to Phase 2 when: wound healed, pain controlled, PROM progressing without sharp pain.			
Phase 2 Weeks 6–12	Goals - Wean sling; progress to full AROM - Restore scapulohumeral rhythm - Begin cuff activation	Precautions - AROM/strengthening per timing above - No heavy/repetitive overhead load - Progress by response, not calendar — back off if pain spikes	Treatment Focus - AAROM → AROM all planes (pulley, wall slides, cane) per timing above - Scapular/rhythmic stabilization drills, 2–3x/wk - Submax cuff isometrics (IR/ER holds, 10–15 sec) - Once cleared above: light isotonic IR/ER (band), 2–3 sets x 10–15 - Sleeper/cross-body stretch PRN tightness
► Advance to Phase 3 when: AROM progressing with good mechanics, cuff activation pain-free.			

Phase	Goals	Precautions	Treatment Focus
Phase 3 Weeks 12–24	Goals • Restore full strength/endurance • Normalize mechanics under load • Functional/sport-specific prep	Precautions • Progress load gradually, per therapist assessment • Allow more time for larger/lower-quality tears • Delay heavy overhead/high-demand tasks until mechanics support them	Treatment Focus • Progressive resisted cuff/scapular strengthening (band/dumbbell), 2–3 sets x 10–15, advancing load • Closed-chain and rhythmic stabilization progression • Functional, work-, or sport-specific drills as appropriate • Gradual return to running, lifting, overhead, impact activity • Strength/functional testing at therapist discretion
► Full Release (typically 4–6 months / 16–24 wks): pain-free full AROM, strength/endurance ~symmetric, no compensation, tolerates functional/sport demands.			

Special Considerations

- Concurrent subscapularis or biceps procedure: modify ROM/resistance as indicated
- Assumes isolated, small, primary repair unless noted otherwise.

Thank you for taking care of our patient.

This protocol serves as a general guideline and outline only. Our team defers to the clinical judgment and expertise of the treating physical therapist to make appropriate adjustments and modifications based on the individual patient's presentation, progress, and response to treatment. For any questions regarding this protocol, please contact Dr. Wollenman directly at (561) 215 – 0184.