



ROTATOR CUFF REPAIR PROTOCOL

(SECURE/COMPLETE REPAIR)

—
MR DEVINDER GAREWAL

MBBS (Melb), BMedSci, FRACS (Ortho), FAOrthA

ORTHOPAEDIC SHOULDER SURGEON

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SLING	WHEN WILL I GO HOME?	WHAT CAN I DO?	WHAT CAN'T I DO?
4 weeks	You will be discharged on the same day as the operation	Range of movement within the safe zone*	No active or forced movement, no lifting

ACUTE PHASE (0-4 WEEKS)

GOALS:

- Reduce pain
- Protect the integrity of the repair
- Optimise tissue healing
- Maintain/regain range of movement
- Minimise muscle inhibition

REHABILITATION:

*Safe zone: commence with passive range of movement to 90° elevation, 20° external rotation

- Progress to active assisted & active supported mobilisation within that zone
- Elbow, wrist and hand exercises
- Simple scapular mobilisation exercises
- Closed kinetic chain/proprioception exercises – low load and ensuring congruency scapula on thorax
- Gentle isometrics rotator cuff

CRITERIA FOR PROGRESSION:

- Control of pain
- Range of movement

INTERMEDIATE PHASE (4-8 WEEKS)

GOALS:

- Discard use of sling
- Preserve integrity of surgical repair
- Restore functional range of movement including full elevation
- Re-educate cuff recruitment and scapular control through range
- Re-educate sensorimotor/proprioceptive function

REHABILITATION:

- Progress range of movement to restore functional range
- No forced end range mobilisation
- Begin active range of movement exercises from 6 week mark
- Mobilise capsular restriction if necessary
- Progress cuff and scapular recruitment through range
- Progress kinetic chain integration
- Increase functional emphasis movement pattern correction
- Closed kinetic chain work to enhance co contraction
- Hydrotherapy permitted

CRITERIA FOR PROGRESSION:

- Pain free functional range of movement
- Good control of rotator cuff and scapular musculature through functional range through functional range



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LATE PHASE (>8 WEEKS)

GOALS:

- Restore full active range of movement
- Establish optimal neuromuscular control of shoulder girdle musculature
- Restore optimal cuff and scapula control through range and under load
- Optimise function specific power, strength and endurance
- Transference movement pattern correction and cuff/scapula control to functional tasks
- Return to work/sport and recreational activities

REHABILITATION:

- Progress active range of movement
- Regain optimal range of movement into combined positions
- Enhance neuromuscular control through range and incorporated with kinetic chain
- Closed kinetic chain exercises with increased load
- Functional specific strengthening and endurance exercises
- Sports/functional specific rehab

GUIDELINES FOR RETURN TO FUNCTIONAL ACTIVITIES

DRIVING	6 weeks
LIFTING	Light lifting at 3 months. Avoid heavy lifting until 6 months.
SWIMMING	Breaststroke 6 weeks, freestyle 12 weeks
GOLF	4 - 6 months