



# ROTATOR CUFF REPAIR PROTOCOL

(NON-SECURE/INCOMPLETE REPAIR)

—  
**MR DEVINDER GAREWAL**

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

**ORTHOPAEDIC SHOULDER SURGEON**

WARRINGAL MEDICAL CENTRE SUITE 9, 214 BURGUNDY STREET HEIDELBERG, VIC 3084

TEL: 1300 ARMCLINIC | 1300 276 254 EMAIL: ADMIN@MELBOURNEARMCLINIC.COM

[WWW.MELBOURNEARMCLINIC.COM](http://WWW.MELBOURNEARMCLINIC.COM)



## ROTATOR CUFF REPAIR - INSECURE/INCOMPLETE

MR DEVINDER GAREWAL

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

ORTHOPAEDIC SHOULDER SURGEON

SLING	WHEN WILL I GO HOME?	WHAT CAN I DO?	WHAT CAN'T I DO?
6 weeks	You will be discharged on the <b>same</b> day as the operation	Range of movement within the safe zone*	No formal strengthening until 12 weeks, no lifting

### ACUTE PHASE (0-4 WEEKS)

#### GOALS:

- Reduce pain
- Protect surgical repair
- Optimise tissue healing
- 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
- No range of movement outside this zone
- No forced movement
- Elbow, wrist and hand exercises
- Simple scapular mobilisation exercises
- Closed kinetic chain/proprioception exercises – low load and ensuring congruency scapula on thorax and must be pain free
- Gentle isometrics rotator cuff

#### CRITERIA FOR PROGRESSION:

- Controlled pain

### INTERMEDIATE PHASE (4-12 WEEKS)

#### GOALS:

- Discard use of sling at 6 weeks
- Preserve integrity of surgical repair
- Restore functional range of movement
- 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 8 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 from 6 weeks

#### CRITERIA FOR PROGRESSION:

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



## ROTATOR CUFF REPAIR - INSECURE/INCOMPLETE

MR DEVINDER GAREWAL

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

ORTHOPAEDIC SHOULDER SURGEON

### 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	8 weeks
LIFTING	Light lifting at 4 months. Avoid heavy lifting for 6 months.
SWIMMING	Breaststroke 8 weeks, freestyle 14 weeks
GOLF	5 - 6 months