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Mini Rotator Cuff Repair Rehabilitation Protocol

Post-Op: 1 - 10

1. Arm in sling - out for exercises only.
2. Do not allow wounds to get wet while bathing or showering.
3. Ice before and after exercise sessions and as often as possible throughout the day.
4. Active Exercises, performed 2 - 3 times daily:
 - a. Codman's Pendulum Swings,
 - b. Gripping Exercises,
 - c. Wrist Flexion/Extension,
 - d. Isometric Towel Squeezes, and
 - e. Elbow Flexion Exercises.
5. Passive Exercises: use involved hand to lift involved arm through a pain-free range of motion, performed 2 - 3 times per day.
 - a. Bent-Arm Flexion,
 - b. Bent-Arm Abduction,
 - c. Bent-Arm Extension,
 - d. Seated Internal/External Rotation with arm adducted and elbow flexed to 90°.
6. Physician examination at 7 - 10 days post-op.

Post-Op: Day 10 - Week 3

1. Sling off except when in crowds, you become fatigued, or in stressful situations.
2. May shower when sutures have been removed and wounds have sealed.
3. Continue to ice before and after exercise sessions, and during the day as needed.
4. Continue previous Active Exercises and add:
 - a. Supine Triceps Extensions,
 - b. Shoulder Shrugs, and
 - c. Bent-Over Rows.
5. Progress Passive Exercises to Active-Assisted Exercises using a T-Bar or Pulley apparatus. Performed 3 - 4 times daily.
 - a. Straight-Arm Flexion,
 - b. Straight-Arm Abduction,
 - c. Straight-Arm Extension,
 - d. Supine Internal/External Rotation with arm adducted and elbow bent to 90°, and
 - e. Wall Ladder Climbs for Shoulder Flexion and Abduction.

Post-Op: Week 3 - 6

1. Discontinue Sling Use.
2. Ice before and after exercise sessions.
3. Stretch before and after exercise as tolerated:
 - a. Horizontal Adduction Stretch,
 - b. Triceps/Inferior Cuff Stretch,
 - c. Internal Rotation with shoulder abducted and elbow bent 90°, and
 - d. External Rotation with shoulder abducted and elbow bent 90°.
4. Continue previous Active-Assisted exercises 4 - 5 times weekly, and add:
 - a. Progress towel squeezes to shoulder adduction using sport cord, and
 - b. Upper Body ergometer as tolerated with low resistance and low RPM.
5. Progress Active-Assisted Exercises to Active Exercises, as tolerated, 3 - 4 times weekly and add:
 - a. Prone Horizontal Abduction,
 - b. Prone Extension with internal rotation of shoulder, and
 - c. Supine dumbbell press (with no weight).
6. Full Active-Assisted Range of Motion is expected by 6 weeks post-op.
7. Physician examination at week 6.

Post-Op: Week 6 - 10

1. Continue previous stretching exercises before and after exercise sessions as part of a general warm-up and cool-down.
2. Continue previous Active Exercises and add:
 - a. Biceps Curls,
 - b. Triceps Extensions,
 - c. Supraspinatus (Empty Can),
 - d. Parallel Dips,
 - e. Bench Press,
 - f. Push-Ups,
 - g. Bent-Over Rows,
 - h. Lat Pulldowns,
 - i. Behind the neck overhead press, and
 - j. Internal/External Rotation with shoulder abducted and elbow flexed to 90°.
3. Full return to athletic activities is expected at 3 - 4 months post-op.

Patients heal at different rates, possess various pre-operative deficiencies, and require specific attributes to perform normal function. Due to these factors, this protocol must be individualized to each patient to allow for optimal return to desired activities.