
PHYSICAL THERAPY REHAB PROTOCOL

Revision Rotator Cuff Repair

Rehab Protocol

Weeks 1–4: Rest and Healing Phase

Sling immobilizer at all times except for exercises.

Home Exercise Program

- Manual scapular manipulation with patient side-lying (non-operative side)
- Supine passive ROM forward flexion in scapular plane to 100°
- Supine passive ROM external rotation to neutral

Weeks 4–9: Protective / Early Motion Phase

Sling immobilizer at all times except for exercises.

- **PROM:** forward flexion in scapular plane — no limits; external rotation 45°; internal rotation 30°
- **Therapeutic exercises:** Codman's, wand exercises
- **Strengthening:** rotator cuff isometrics with arm in 0° of abduction and neutral rotation; scapular stabilization, no resistance; abdominal and trunk exercises

Weeks 10–13: Early Strengthening Phase

- Continue above exercises as necessary
- **PROM/AAROM:** FF/ER/IR — full (go slow with ER)
- **Therapeutic exercises:** continue wand exercises for ER/IR/FF; flexibility; horizontal adduction (posterior capsule stretching)
- **Strengthening:** rotator cuff isotonic strengthening exercises
- **AROM:** side-lying ER and supine FF in scapular plane
- Progress to standing FF
- ER/IR at modified neutral with elastic bands

Weeks 14+: Late Strengthening Phase

- Progress isotonic strengthening of periscapular and rotator cuff musculature: lat pull-downs, row machine, chest press
- **Flexibility:** side-lying posterior capsule stretch
- Progress scapular stabilization program
- Initiate isokinetic strengthening (IR/ER) in scapular plane

- Begin light plyometrics at 16-18 weeks
- Individualize program to meet sport-specific requirements at 20-24 weeks
- Initiate throwing program for overhead athletes at 20-24 weeks

These instructions are general guidelines from Dr. Tannenbaum's office. Always follow any specific instructions given to you by Dr. Tannenbaum or his team. Questions? Call Southern Indiana Orthopedics at (812) 376-9353.