

# Rehabilitation Guidelines for Large/Massive Rotator Cuff Tears following surgical repair

Phase	Intervention	Goals and Criteria for Progression
<b>Weeks 0-6 Post-Op</b>	<p><b>Post-Op Day 1:</b>            Patients may be immobilized in sling or abduction brace</p> <ul style="list-style-type: none"> <li>• If sling, use for comfort and when in public</li> <li>• If abduction brace, immobilize for 3-6 weeks per physician recommendation</li> </ul> <ul style="list-style-type: none"> <li>• Pendulums</li> <li>• Hand squeezes</li> <li>• Elbow AROM</li> </ul> <p><b>7-10 days post-op:</b></p> <ul style="list-style-type: none"> <li>• Pendulums</li> <li>• Supine PROM flexion and ER above level of brace</li> <li>• Modalities PRN</li> </ul>	<p>Protect incision/promote healing</p> <p>Monitor for infection</p> <p>Patient education</p> <p>Initiate ROM exercises</p>
<b>Weeks 6-12 Post-Op</b>	<p><b>Physical Therapy Treatment:</b></p> <ul style="list-style-type: none"> <li>• Begin AAROM activities in supine, progress to “beach chair” or semi-reclined position</li> <li>• Progress to AROM in supine/gravity-minimized positions</li> <li>• Submax manual resistance</li> <li>• Rhythmic stabilization exercises</li> <li>• Table slides</li> <li>• Forward Bow</li> <li>• Side lying abduction</li> <li>• Supine punches</li> </ul> <p><b>Scapular strengthening with arms below shoulder height</b></p> <ul style="list-style-type: none"> <li>• Prone Row</li> <li>• Prone Extension</li> <li>• ER/IR</li> <li>• Standing Tubing Row</li> </ul>	<p>Improve to full AROM</p> <p>Improve neuromuscular control and strength</p> <p>Be able to elevate to 90° elevation in scapular plane without humeral head elevation</p>

	<p><b>Closed chain stabilization exercises</b></p> <ul style="list-style-type: none"> <li>• <b>Begin in quadruped</b></li> </ul> <p><b>Elbow/wrist/hand strengthening</b></p> <p><b>Modalities PRN. Consider NMES to posterior cuff</b></p>	
<p><b>Weeks 12-16 Post-Op</b></p>	<p><b>Continue to progress all exercises from previous phases</b></p> <p><b>Closed chain stabilization exercises at 90° elevation</b></p> <p><b>Continue rhythmic stabilization drills with more advanced activities including labile surfaces</b></p>	<p><b>Achieve full AROM in the scapular plane</b></p> <p><b>Improve endurance</b></p> <p><b>Begin progressing to PROM</b></p> <p><b>Optimize neuromuscular control</b></p> <ul style="list-style-type: none"> <li>• <b>No humeral head elevation with flexion</b></li> </ul>
<p><b>Weeks 16-6 months Post-Op</b></p>	<p><b>Progress exercises from previous phases</b></p> <p><b>When appropriate:</b></p> <ul style="list-style-type: none"> <li>• <b>Push-ups/DB bench pressing</b></li> <li>• <b>Shoulder Press</b></li> <li>• <b>UE Plyometric activities</b></li> </ul> <p><b>Bilateral shoulder flexion on the wall</b></p> <p><b>Wall Angels</b></p>	<p><b>Achieve full AROM in all planes</b></p> <p><b>Strength testing strong and painless, should not be able to “break” patient during test</b></p> <p><b>HHD testing when appropriate</b></p> <p><b>Return to work/sport or desired activities</b></p> <p><b>Emphasize prevention and long-term HEP</b></p>