

# **Postoperative protocol following Rotator cuff repair**

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- Dressings are changed as needed.
- Generally, **NO** sutures/stitches need removal (as most often, they are either not applied or if present are dissolving)
- Unless specifically stated in operation notes, the postoperative protocol is as under.

## **First 2 weeks**

- Mobilise hand/wrist/elbow
- Passive-assisted exercises for shoulder
- Avoid Elevation/abduction/external rotation > 40 degrees x 4/52
- Avoid Internal rotation x 4/52
- Scapular stabilisation/setting exercises
- Introduce active-assisted exercises towards end of second week

## **2-4 weeks**

- Active-assisted exercises
- Begin glenohumeral motion
- Increase external rotation

## **After 4<sup>th</sup> week**

- Increase ROM exercises
- Introduce strengthening exercises after the 6<sup>th</sup> week
- Scapular stabilisation
- Increase internal rotation movements/using towel behind back etc.

## **After 6<sup>th</sup> week**

- Eccentric rotator cuff strengthening exercises
- Capsular stretching – adduction/internal + external rotation
- Scapular positioning and mobilisation
- Introduce therabands and progress over 3-4 months
- Concentric rotator cuff strengthening as tolerated
- Do NOT over exert and rest/reduce repetitions if painful
- Avoid lifting heavy weights (generally more than 5 kgs) above shoulder level x 3/12

Advice on use of polysling:

- I encourage patients to mobilise the arm out the sling within the range of motion noted above
- The polysling should be used mainly in between as support and also at night
- After 6 weeks, patients can be weaned of the sling all together

**When to discharge from physiotherapy:**

- No pain
- Near full range of motion
- Functional use of arm/shoulder
- Good cuff strength