

Rotator Cuff Repair (Standard) With or Without Biceps Tenodesis

Postoperative protocol

Phase I – Maximum protection

Weeks 0-6:

- Sling for 6 weeks, ultra-sling with abduction pillow
- Avoid active motion of shoulder
- Avoid loaded elbow flexion
- **Passive range of motion only**
 - No motion x2 weeks
 - Progressive PROM in all directions as tolerated
 - Avoid ER past 20 degrees if subscapularis repair

Goals

- Reduce inflammation
- Decrease pain
- Postural education

Treatment suggestions

- Cervical range of motion and basic deep neck flexor activation (chin tucks).
- Instruction on proper head, neck, shoulder alignment
- Active hand and wrist range of motion
- Active shoulder retraction
- Passive scapular mobility
- Upper thoracic mobilization
- Pendulums
- Ice and modalities to reduce pain and inflammation

Phase II – Restoring mobility, function and active range of motion

Weeks 6-12:

- Discontinue sling
- Resume light ADLs (<2#), ensuring no heavy lifting, pushing, pulling or repetitive reaching

Goals

- Continued protection of repaired tissue, while slowly progressing to full active range of motion
- Full PROM in all planes
- No compensatory arm elevation strategies (e.g. no shoulder shrug with reaching)

Treatment suggestions

- Progress from AAROM to AROM when adequate strength and motor control
- Start strengthening when full AROM is achieved (progress slowly)
- Avoid loaded RC strengthening in overhead positions until 12 weeks
- Dynamic stabilization exercises with light perturbation isometrics
- Progress to higher intensity cardio training (avoid running)
- Prone YTI drills
- Begin light bicep loading between 8-12 weeks, progress slowly

Phase III – Advanced strengthening and proprioception

Weeks 12-20:

Goals

- Progressive strengthening and endurance training
- Introduction of sport-specific drills (avoid participation in sport until cleared by surgeon)

Treatment suggestions

- Begin strengthening at or above 90 degrees with prone and/or standing YTI
- Initiate light bench press and shoulder press (pain-free)
- Closed chain perturbation training, plank progressions, etc.
- Push-up progression (counter height → knee height → floor)