

Arthroscopic Rotator Cuff repair +/- Biceps Tenodesis Rehabilitation Program

Nicholas M. Capito, MD

Diagnosis: Right / Left RTC Repair w/Biceps Tenodesis

Date of Surgery:

Weeks 0-4/5 (Phase I):

- Sling in neutral rotation (padded abduction sling)
- Codman/Pendulum exercises x 1 week
- Week 2 begin Passive (self-assisted) supine shoulder forward elevation and external rotation
- Passive elbow flexion and active extension. Active wrist ROM, grip strengthening
- Encourage patients to perform exercises at home 5x/day

Week 4/5 (Phase II):

- Depending on tear size, surgeon will determine to D/C sling after 4 or 5 weeks
- True PROM only for the shoulder! The rotator cuff tendon needs to heal back into the bone

Weeks 5-12 (Phase III):

- Shoulder ROM goals: 140deg FF/40o ER at side; ABD max 60-80o without rotation
- Begin AAROM→AROM as tolerated
- May work up to 5lb resistance
- PROM → AAROM → AROM of elbow without resistance. This gives biceps tendon time to heal into new insertion site on humerus without being stressed
- Encourage pronation/supination of forearm without resistance
- Grip strengthening
- No canes/pulleys with the shoulder until 6 weeks post-op, because these are active-assist exercises
- Begin scapular exercises, PRE's for large muscle groups (peccs, lats, etc)
- Isometrics with arm at side
- Heat before PT, ice after PT per therapist's discretion

Months 3-12 (Phase IV):

- □Advance to full ROM as tolerated with passive stretching at end ranges
- □Advance strengthening as tolerated: isometrics→bands→light weights (1-5 lbs); 8-12 reps/2-3 sets per rotator cuff, deltoid, and scapular stabilizers
- □Only do strengthening 3x/week to avoid rotator cuff tendonitis
- □Begin eccentrically resisted motions, plyometrics (ex. Weighted ball toss), proprioception (es. body blade)
- Begin sports related rehab at 4 1/2 months, including advanced conditioning ➤ Return to throwing at 6 months
- Collision sports at 9 months
- MMI is usually at 12 months post-op