

Rotator cuff Repair Physical Therapy Orders

1. Patient:
2. 2. Date of Surgery: _____ Date of injury: _____
3. Type of Surgery: _____ shoulder arthroscopic/open debridement, synovectomy, chondroplasty, biceps tendon debridement/tenolysis/tenodesis/repair, subacromial decompression, Mumford procedure, rotator cuff repair
4. Type of Repair: mini open/open/arthroscopic
5. Tendon Involvement: subscapularis/supraspinatus/infraspinatus/teres minor
6. Exercises week 0-4: pendulum, supine elevation passive with good arm and elbow flexed, passive slides, supine passive and external rotation with cane/ski pole, active elbow flexion and extension. Gentle passive stretch is allowed to insure glide of the rotator cuff.
Use of hand to eat, read, work computer is allowed yes/no.
The patient may open the wrist band to extend elbow p.r.n. yes/no.
Large tear preparations using maximal gentle technique: yes/no.
7. Exercises week 4-6: the patient may discontinue the shoulder immobilizer, the patient may do light activities without active elevation, the patient may do active assisted external rotation, the patient should continue with passive exercises for elevation, the patient should have passive stretch especially to maintain external rotation and abduction and elevation.
8. Exercises week 6-8: the patient may do active internal and external rotation, the patient may do active assisted elevation with pulleys, should continue stretch towards full range of motion.
9. Exercises Week 8-10: the patient may begin active elevation with elbow flexion and stretching exercises to return to full range of motion.
10. Exercises week 10-16: the patient should progress in strengthening exercises and functional rehabilitation.
11. Comments: 2-3 times a week for 4 weeks initially. Report any wound issues or problems.