

Rotator Cuff Repair (Medium to Large Tear) Rehabilitation Protocol

Key Surgical Considerations

Medium-to-large rotator cuff tears (1.5–4 cm) require slower progression, longer immobilization, and significantly restricted early motion. Tissue tension and retraction increase strain risk. Rehabilitation emphasizes strict protection for the first 6 weeks, gradual mobility, and delayed strengthening.

PHASE I — Immobilization & Protected PROM (0–6 Weeks)

- Sling with abduction pillow FULL TIME.
- PROM only: FE 0–60° weeks 0–2 → progress to 90° weeks 3–6.
- ER 0–15° weeks 0–2 → 30° by week 6.
- No active shoulder ROM.
- No lifting, pushing, or pulling.

Goal: protect repair, prevent stiffness, minimize tendon tension.

PHASE II — Controlled PROM → AAROM (6–10 Weeks)

- PROM: FE to 120°, ER to 45°.
- Begin AAROM: wand, table slides, assisted elevation.
- Introduce light AROM in supine → incline positions.
- No resisted cuff work.
- Avoid painful arcs.

Goal: restore controlled mobility without stressing repair.

PHASE III — Active ROM & Early Strengthening (10–16 Weeks)

- Full AROM progression to tolerance.
- Begin strengthening:
 - Light ER/IR band exercises.
 - Side-lying ER (1 lb max).
 - Scapular rows, serratus punches.
 - Prone Y/T/W with caution.
- No overhead resistance.
- Avoid long-lever elevation with weight.

Goal: restore active control and scapular stability.

PHASE IV — Progressive Strengthening (16–24 Weeks)

- Increase resistance: bands → 1–5 lb dumbbells.
- Closed-chain: wall push-ups, progressing to table push-ups.
- Functional kinetic-chain strengthening.
- Begin overhead strengthening gradually after 20 weeks.

Goal: regain functional strength for ADLs and work.

PHASE V — Return to Activity (24–32 Weeks)

- Sport- or work-specific progression.
- Overhead progression as tolerated (light loads).
- Plyometrics for athletes after week 26.

Goal: return to full, pain-free functional activity with robust cuff strength.

Selected References

1. Galatz LM, et al. Outcomes after rotator cuff repair of large and massive tears. *J Bone Joint Surg Am.* 2. Burkhart SS, et al. Rehabilitation guidelines after arthroscopic rotator cuff repair. *Arthroscopy.* 3. Denard PJ, et al. Early vs delayed rehab after cuff repair. *J Shoulder Elbow Surg.* 4. Thigpen CA, et al. Evidence-based rotator cuff rehabilitation. *Sports Health.*

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