450 Broadway St. MC 6120 Redwood City, CA 94063 Ph: 650-723-5643 Fax: 650-723-3429 3801 Miranda Ave. MC Ortho 112 Palo Alto, CA 94304 Ph: 650-493-5000 x66101 Fax: 650-849-1265

MASSIVE ROTATOR CUFF REPAIR PROTOCOL

Name:	
Diagnosis:	
Date of Surgery:	
Frequency: 1 2 3 4 times/week Duration: 1 2 3 4 5 6 Week	ζS
Days 0 - 7	
 Patient to do Home Exercises given post-op (pendulums; ROM elbow, wr hand, grip strengthening) Patient to remain in sling for 6 weeks AT ALL TIMES (except for personal grooming) 	
Weeks 1 - 12	
 Pendulums Passive external rotation limit 30° (supine, roll towel under elbow) Passive forward elevation limit 90° (supine, elbow bent at 90°, in scaptio Table slides at 14 days, hand resting on table, torso leaning forward, pain free Address posterior capsular tightness at 3 months if indicated 	_
Minimal to no pain during or after exercises, although fatigue is OK	
AVOID:	
NO Pulleys NO internal rotation behind back NO external rotation stretching with arm in 90° of abduction NO stretching in abduction NO strengthening until 3 months	
Modalities:	
Other:	
Signature Date:	_