## Mr Mark S. Falworth MBBS FRCS(Eng) FRCS (Orth)

Consultant Orthopaedic Surgeon Shoulder and Elbow Surgery

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# <u>Physiotherapy protocol</u>: Open Rotator Cuff Augmentation (allograft) repair + subacromial decompression

Date of Surgery 05-04-19

Diagnosis; Near complete failure of SSp tendon

Operation: Derma allograft augmentation . repair SSp

#### Weeks 0-6:

- Elbow ROM, wrist ROM, grip strengthening and scapular setting exercises
- Patient to remain in sling for 6 weeks
- True PROM only the rotator cuff tendon needs to heal back into the bone
- ROM goals: 110° FE, 20° ER at side; ABD max 60-80° without rotation
- No resisted motion of shoulder until 12 weeks post-op
- Minimise canes/pulleys until 6 weeks post-op, because these are active-assisted exercises
- Heat before Physio, ice / cryocuff after

#### Weeks 6-12:

- Begin AAROM as tolerated
- Goals: re-establish full range of movement with 160 FE, 30 ER increasing as tolerated
- Light passive stretching at end ranges
- At 8 weeks, can begin isometric strengthening to unaffected muscle groups ...ISp, SSc

### Months 3-12:

- Advance to full AROM 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 stabilisers
- Be careful not to overdue strengthening to avoid rotator cuff tendonitis (3x/week)
- Begin eccentrically resisted movement and exercises as able

#### Comments:

# www.shoulderandelbowsurgeon.co.uk