

## ROTATOR CUFF REPAIR -DR. PRODGER

### **General Information:**

Open procedure therefore sling for 4-6 weeks. Sling to be removed for exercise and shower only for first 2 weeks then may also be removed for sleeping.

No active flexion or abduction for 6 weeks.

## Pre-op (only seen if specific concerns):

- Sling fitted
- Post-op exercises reviewed: hand/wrist, elbow flexion/extension, scapular setting and pendulum only

#### Day 1:

- Review surgical notes to check any specific post-op orders
- Patients should be seen a.m. and p.m. to remove sling and complete exercises
- Patients to be provided with post-op exercise sheet (St. Vincents Shoulder Surgery)

#### Discharge:

- Normally on Day 1-2
- Physio referral on discharge unless advised otherwise by Dr. Prodger.
- Continue above exercises until reviewed by surgeon at 2 weeks
- · Keep wound dry and intact until review

# At 2 Weeks:

Passive shoulder exercises added –Dr. Prodger will advise

## 0-6 Weeks:

- 1. No active flexion or abduction for 6 weeks.
- 2. Pendular exercises, wrist/elbow, active ER to neutral
- 3. No active or passive hand behind back for 6 weeks.
- 4. Other restrictions may apply on an individual basis as per Dr. Prodger.
- 5. Aim to restore full shoulder passive ROM. Aim for full flexion PROM by 6 weeks
- 6. Come out of sling for ADL's at waist height through the day

## 6-12 weeks:

- 1. Full passive flexion, IR and ER.
- 2. Commence active ROM. Aim for full range by 12 weeks.

#### 12-16 Weeks:

1. Commence strengthening

NB: If Rotator Cuff irreparable then treat as Acrompioplasty



**Last Review Date:** 

2.2012

**Next Review Date:** 

2.2015