

Physical Therapy Prescription – Arthroscopic Rotator Cuff Repair

Subscapularis

Name: _____ Date: _____

Diagnosis: R / L arthroscopic rotator cuff repair Date of Surgery: _____

Frequency: 2-3 times per week for _____ weeks, beginning 2 weeks after surgery

WEEKS 0 – 2: Period of protection → no therapy for the first 2 weeks

- **Sling with abduction pillow:** Must wear at all times except for hygiene
- **Range of Motion:** No shoulder ROM allowed; elbow/forearm/wrist/hand motion ONLY
- **Exercises:** pendulums and grip strengthening; NO shoulder strengthening or motion exercises permitted

Therapy Phase I (Weeks 2 – 6 after surgery)

- **Sling with abduction pillow:** Continue
- **Range of Motion:** PROM only, including FF, ER, and ABD (within a comfortable range); No AROM/AAROM. Limit ER to 45°.
- **Exercises:** continue pendulums; posterior capsule mobilizations. Avoid anterior capsule stretch and extension. No active IR.
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Therapy Phase II (Weeks 6 – 12 after surgery)

- **Sling with abduction pillow:** Discontinue at 6 weeks
- **Range of Motion:** Progress PROM to tolerance. Begin AAROM → AROM
 - **Goals:** Full ER, 135° flexion, 120° abduction
- **Therapeutic Exercises:** Progress Phase I exercises; no shoulder strengthening yet. Begin active assisted, deltoid/rotator cuff isometrics at 8 weeks. No resisted IR. Begin resistive exercises for scapular stabilizers, biceps, triceps, and RTC. Keep all strengthening exercises below the horizontal plane in phase II.
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Therapy Phase III (Weeks 12 – 16 after surgery)

- **Range of Motion:** Begin to AROM in all planes → progress slowly
- **Therapeutic Exercises:** Begin isometric exercises (use pillow or folded towel without moving the shoulder); no resistance exercises until 12 weeks after surgery. Running/biking OK.
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Therapy Phase IV (Weeks 17 – onward)

- **Range of Motion:** Progress to full, painless, AROM
- **Therapeutic Exercises:** Aggressive scapular stabilization and eccentric strengthening. Begin plyometric and throwing/racquet program, continue with endurance activities.
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

Signature: _____

Date: _____