

PT PROTOCOL

Rotator Cuff Tear — Non-Operative

Rehabilitation Protocol



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| <p>Weeks 0-4</p> <p>Protect & manage pain; passive/AAROM only, sling if needed</p> | <p>4-8 Weeks</p> <p>Restore ROM; scapular stabilization, gentle isometrics</p> | <p>8-12 Weeks</p> <p>Progressive rotator cuff/scapular strengthening; functional reaching & lifting</p> | <p>Months 3+</p> <p>Return to function; advanced strengthening, activity-specific training</p> |
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Milestones above are goals, not guarantees; progression is pain- and criterion-based. Outcomes vary between individuals and may not match what is achievable with surgical repair.

Phase 1 Weeks 0-4

Sling: For support/comfort if recommended by your care team; not a strict immobilization requirement. Avoid heavy lifting, overhead activities, and any activity that causes pain.

Range of Motion

- Passive and active-assisted range of motion, within a pain-free range only — avoid forceful or excessive stretching.
- Seated flexion table slide, horizontal table slide, active-assistive shoulder flexion, shoulder flexion with cane, cane external rotation stretch, washcloth press, sidelying elevation to 90°.

Therapeutic Exercises

- Ice and gentle soft tissue/joint mobilization within pain tolerance; no formal strengthening yet.

Phase 2 Weeks 4-8

Range of Motion

- Continue passive/active-assisted range of motion, pain-free: seated elevation with cane, seated incline table slides, ball roll on wall, supine flexion, salutes, supine punch, wall climbs.
- Gentle stretching: external rotation at 90° abduction, hands behind head, internal rotation behind back with towel, sidelying horizontal adduction, sleeper stretch, triceps/lats stretch, doorjamb series.

Therapeutic Exercises

- Anterior deltoid isometrics, progressing to isotonic work with resistance bands or light dumbbells.
- Scapular stabilization: scapular retraction, prone scapular retraction, standing and supported scapular setting, inferior glide, low row.
- Proprioception/neuromuscular control: internal/external rotation in scaption and flexion 90°-125° (rhythmic stabilization), quadruped alternating isometrics, ball stabilization on wall.

Phase 3 Weeks 8-12

Therapeutic Exercises

- Progressed anterior deltoid isotonic.
- Rotator cuff progressive resistance: internal/external rotation isometrics, sidelying external rotation, standing external/internal rotation with band, sidelying-to-standing abduction.
- Scapular stabilization: row on physioball, shoulder extension on physioball or with band, seated rows, rowing, lawn mowers, "robbery," serratus punches.
- Core and lower-extremity strengthening for general body stability.
- Neuromuscular control: push-up plus on knees, prone shoulder extension I's, band forward punch, tripod, pointer.
- Functional training: gradual progression of reaching, lifting, and carrying with proper body mechanics.

Therapeutic Exercises

- T and Y raises, push-up plus (knees extended), wall push-up, "W" exercise/band W's, dynamic hug/band dynamic hug, external/internal rotation at 90° with band, PNF D1 and D2 diagonal lifts, field goals, wall slides with band.
- Incorporation of activity-specific exercises tailored to desired function.
- *Return to function when range of motion and strength are maximized and pain-free, motor control during functional movement is improved, and desired activities can be performed without limitation.*