

Comprehensive Orthopaedics, S. C.

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PHYSICAL THERAPY PROTOCOL STATUS POST MINI OPEN/OPEN ROTATOR CUFF REPAIR

Immediately postop: The patient will be in an immobilizer or sling with cold flow unit to the shoulder. The patient should release his elbow and work on elbow and wrist motion actively and passively to prevent stiffness at these points. The patient can also start working on gentle Codman exercises to the shoulder.

First week postop: The patient will visit physical therapy and instruction on passive range of motion to the shoulder as well as active motion to the elbow, forearm, wrist, and hand will be instituted. The patient and his family member or assistant will be instructed on a home exercise program to demonstrate passive range of motion to the affected shoulder in all planes with the goal being 90 to 120 degrees of elevation and abduction, 60 to 75 degrees of internal and external rotation passively by six weeks postop. The patient will continue with formal physical therapy anywhere from one to two times per week with unusual circumstances.

Six to eight weeks: If all is going as planned, the patient will now be instructed to continue with passive motion with expected goal to gain full passive motion in all planes by the end of eight weeks and to start gentle to moderate active assisted motion to the affected shoulder.

Eight to ten weeks: If they have made appropriate gains in the above passive range of motion and active assisted motion, the patient will be started on gentle isometric strengthening to the affected shoulder two times per week in physical therapy. An early home exercise program will be stressed as well.

Ten weeks and on: If the patient has made appropriate gains, a formal strengthening protocol will be initiated with the goal to reach pre-injury status in work and non-work activities. Return to work and sports will be based on strength and motion gains.

SIG:db