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Large Rotator Cuff Repair

	Rehabilitation
On Discharge - 4 Weeks	• Sling 6 weeks, if abduction wedge then reduce to standard sling at 2-3 weeks • Advice on sling management • Neck, elbow, wrist & hand exercises • Postural awareness and scapula control • Active assisted closed chain ROM in safe zone (short lever) • Kinetic chain rehabilitation • Thoracic spine ROM • Avoid combined abduction and external rotation and hand behind back
4-6 weeks	• Light proprioceptive exercises • Remain in sling
6-8 Weeks **8-12 weeks**	• Wean from sling • Begin isometric strengthening in neutral - sub maximal isometric strengthening approx. 30%) • Progress active assisted ROM beyond safe zone • Begin early rotator cuff strengthening through range • Active short lever kinetic chain rehab' of the affected arm progressing to long lever function movement
12 Weeks	• Patient specific functional/sports training • Begin combined abduction and external rotation • Full kinetic chain rehab • Manual therapy to address and ROM deficits

Sling	Sling 6 weeks (Possible abduction brace)
Physiotherapy Follow Up	Within 2 weeks post op

Milestones	
Week 8	ROM 75%-80% of normal, sling discarded, return to driving as able, return to sedentary work
3-6 months	Full ROM, return to swimming, golf and lifting. Return to manual work as guided by surgeon/physiotherapist
6 months	Unrestricted activity

Patient Specific Instructions/Requirements