

ARTHROSCOPIC ROTATOR CUFF REPAIR REHABILITATION

Please give to your physiotherapist

0 to 6 weeks (see Dr Burrow in his rooms at 2 weeks post-op)

Gentle passive forward elevation 0-90 supine

Passive external rotation from against the tummy to 30 ER

Use the hand and arm for eating, computer, paperwork and light cooking etc.

The hand can move from the ear to the buttock, but don't lift arm out in front above chest height or out the side (abduction)

Wear sling when walking or traveling and at night sleeping for 6 weeks

Otherwise the arm can be out of the sling most of day

3 times a day, wrist and hand exercises with a squeeze ball

Physiotherapy to teach isometric muscle contraction of deltoid and scapular stabilizers, elbow and hand movement

When the wounds have healed: sit in a spa pool, water at chest height and do to-and-fro movements 15 minutes 3 times weekly.

Pain Control

You will be given strong painkillers when you leave the hospital, like Panadeine Forte or Endone to take as breakthrough painkillers or on going to bed at night

You can take anti-inflammatories for 1 week however almost all the post-op pain is better controlled with regular Panadol every 6 hours and Nurofen 6 hourly, 3 hours after the Panadol

Make the arm comfortable by positioning it out of the sling, resting it on your tummy or a pillow

Sleep in a reclining chair with sling and / or with a body-hugging pillow

Regular icing with the ice pack: 30mins, 4 times daily and after exercises or physio is very helpful, after 2 weeks warm-hot water in the shoulder pack, can also be helpful.

6 to 12 weeks after surgery (review with Dr Burrow 8 weeks post-op)

No more sling, except if in a rowdy crowd situation

Passive forward elevation supine 0-180

Active FE 0-90 supine

Full passive ER and IR to buttock

No abduction for 4 months until all other movements are full as premature abduction whilst the shoulder is stiff including abnormal scapulo-thoracic rhythm can result in impingement

Walk for exercise but not on uneven ground

12 – 16 weeks after surgery

Breaststroke swimming 20 minutes, 3x weekly

Work on internal and external rotation passive range of movement

Begin formal strengthening forward elevation / internal / external rotation

Retraining of scapulo-thoracic rhythm and proprioception

You may jog

16 – 24 weeks after surgery (review with Dr Burrow 16-20 weeks post-op)

Continue strengthening and stretching of the shoulder

Obtain full range of motion slowly over 20 weeks

Sports specific strength and endurance training

Tennis overhead serve, freestyle swimming, surfing when fully rehabilitated with respect to motion, strength & proprioception

This usually does not occur until 6 months, 9 months for throwing

You may feel more comfortable with shoulder taped or strapped for sports

Work, sport and driving

Most people can:

After 10-14 days: Return to office or light duties (2kg lifting / mobile phone, no use of the arm at chest height or above, no repetitive duties e.g. Process line work)

2-6 weeks: Only household walking for first 2 weeks, then gentle exercise walking in a sling

3-6 weeks: Start driving 15-30 minutes as you feel safe and confident. No travelling by crowded trains and buses for 8 weeks

No truck driving until 4 months

No heavy lifting, particularly above chest height for 6 months

No Treadmills at the gym for 4 months

GREGGORY BURROW