

## Rotator Cuff Tendonitis/Impingement Rehabilitation Protocol

Name: \_\_\_\_\_  
\_\_\_\_\_

Date:

Diagnosis: \_\_\_\_\_  
\_\_\_\_\_

Date of Surgery:

### ACUTE PHASE -MAXIMAL PROTECTION

- **Goals:**

- Relieve pain and swelling
- Decrease inflammation
- Retard muscle atrophy
- Maintain/increase flexibility
- Active Rest: the elimination of any activity that causes an increase in symptoms

- **Range of Motion Exercises**

- Pendulum Exercises
- AAROM -Limited symptom free available range
- Rope & Pulley
  - flexion
- L-Bar
  - Flexion
  - Neutral external rotation

- **Joint Mobilizations**

- Inferior and posterior glides in scapular plane

- **Modalities**

- Cryotherapy
- TENS

- **Strengthening Exercises**

- Isometrics -submaximal
- External/internal rotation
- Biceps
- Deltoid (anterior, middle, posterior)

- **Patient Education**

- Regarding activity, pathology and avoidance of overhead activity, reaching, and lifting activity

- **Guidelines for Progression**

- Decreases pain and/or symptoms
- ROM increased
- Painful arc in abduction only
- Muscular function improved

### SUBACUTE PHASE -MOTION PHASE

- **Goals**

- Re-establish non-painful ROM
- Normalize arthrokinematics of shoulder complex
- Retard muscular atrophy



- **Range of Motion**
  - Rope & Pulley
    - Flexion
    - Abduction
  - L-Bar
    - Flexion
    - Abduction (symptom free motion)
    - External rotation in 45° of abduction, progress to 90° of abduction
    - Internal rotation in 45° of abduction, progress to 90° of abduction
  - Initiate anterior and posterior capsular stretching
- **Joint Mobilizations**
  - Inferior, anterior, and posterior glides
- **Modalities**
  - Cryotherapy
  - Ultrasound/phonophoresis
- **Strengthening Exercises**
  - Continue isometrics exercises
  - Initiate scapulothoracic strengthening exercises
  - Initiate neuromuscular control exercises
- **Guidelines for Progression**
  - Begin to incorporate intermediate strengthening exercises as:
    - Pain/symptoms decrease
    - AAROM normalizes
    - Muscular strength improves



## **INTERMEDIATE STRENGTHENING PHASE**

- **Goals**
  - Normalized ROM
  - Symptom-free normal activities
  - Improved muscular performance
- **Range of Motion**
  - Aggressive L-Bar AAROM all planes
  - Continue self-capsular stretching (anterior/posterior)
- **Strengthening Exercises**
  - Initiate isotonic dumbbell program
    - Sidelying neutral
      - internal/external rotation
    - Prone
      - extension
      - horizontal abduction
    - Standing
      - flexion to 90°
      - abduction to 90°
  - Initiate serratus exercises
    - Wall push-ups
  - Initiate tubing progression in slight abduction for internal/external rotation
- **Guidelines for Progression**

- Full non-painful ROM
- No pain/tenderness
- 70% Contralateral strength



### **DYNAMIC ADVANCED STRENGTHENING PHASE**

- **Goals:**

- Increase strength, power, endurance
- Increase neuromuscular control

- **Strengthening Exercises**

- Initiate Thrower's Ten Exercise Program (if overhead athlete)
- Isokinetics
  - Progress from modified neutral to 90/90 position as tolerated
- Initiate plyometric exercises (Late in phase)

- **Guidelines for Progression**

- Full non-painful ROM
- No pain or tenderness
- Isokinetic test fulfills criteria
- Satisfactory clinical exam



### **RETURN TO ACTIVITY PHASE**

- **Goals**

- Unrestricted symptom-free activity

- **Initiate Interval Program**

- Throwing
- Tennis
- Golf

- **Maintenance Exercise Program**

- Flexibility Exercises
  - L-Bar
    - Flexion
    - External rotation
    - Self-capsular stretches
- Isotonic exercises
  - Supraspinatus
  - Prone extension
  - Prone horizontal abduction
- Thera-tubing exercises
  - Internal/external rotation
  - Neutral or 90/90 position
- Serratus push-ups
- Interval throwing phase II for pitchers

**Comments:**

**Frequency:** \_\_\_\_\_ **times per week**

**Duration:** \_\_\_\_\_ **weeks**



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**Signature:** \_\_\_\_\_  
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**Date:**