

Medium and small injuries of the rotator cuff – not wider than 3cm in diameter. Abducting stabilizer for 6 weeks, may be removed at bath and meal times. Passive exercises of external rotation with a stick can be started right after the surgery. If the subscapular muscle was damaged too, we exercise the external rotation up to 0°. We start the elbow flexing and extending exercises right after the surgery. The patient starts the exercises of moving on the table right after the surgery. After full 6 weeks we take the stabilizer off and start passive exercises of raising the arm above the head, with a rope in the other hand and we continue exercises with a stick. Active exercises with a small resistance (raising the arm above the head) can be introduced after 12 weeks. At this time we can start exercises in: resistant external rotation, internal rotation and biceps exercises. We continually perform exercises to increase the range of motion.

Huge and massive injuries of the rotator cuff – wider than 3cm in diameter. Abducting stabilizer for 6 weeks, may be removed at bath and meal times. Passive exercises of external rotation with a stick can be started right after the surgery. If the subscapular muscle was damaged too, we exercise the external rotation up to 0°. We remove the stabilizer after 6 full weeks. Then we start passive exercises with the rope in the other hand and we continue exercises with a stick. Do not actively raise your hand above the head (with the strength of the operated arm) for 3 months. If the injury is between 3 to 5cm in diameter, we introduce strengthening exercises 3 months after the surgery. If the injury is wider than 5cm or the procedure was a re-operation, we introduce strengthening after 4 months.

Subscapular muscle injuries

After 6 weeks we begin exercises of the external rotation, beyond the neutral position. If only the upper part was injured, we may start doing passive exercises (up to 20-30°) right after the surgery. Any other recommendation – see the rotator cuff injuries, depending on the size.

Reconstruction of the SLAP injury

We use the abducting stabilizer for 4 weeks after the surgery. We take it off at bath and meal times. We start passive external rotation exercises with a stick immediately after the surgery. The patient starts the exercises of moving on the table right after the surgery. If the surgery was completed with posterior capsulotomy, we start stretching exercises immediately after the surgery. We stop using the stabilizer 4 weeks after the surgery. Since then we start passive exercises of raising the arm above the head with the rope in the other hand and we start stretching exercises (if there's no capsulotomy). We continue with passive external rotation exercises with a stick. We start the stretching exercises "against the wall" 6 weeks after the surgery. We introduce strengthening exercises with resistance in the 6th week after the surgery. We begin to strengthen the biceps 8 weeks after the surgery. We continue stretching to the point of maximum range of motion. Do not do any sport activities that involve throwing or hitting (eg. tennis, volleyball, basketball and so on) up to 7-8 months after the surgery.

The long head of the biceps muscle tenodesis

If the surgery includes rotator cuff reconstruction, the post operative management is the same as with rotator cuff injuries. It's highly important to start active flexion and extension elbow exercises early – right after the surgery. The strengthening exercises can be introduced 3 months after the surgery. We keep the stabilizer for 6 weeks after the surgery. Although, if the tenodesis is an isolated procedure, we may immediately begin with exercises aiming at increasing the range of motion above the head.

The instability procedure - Bankart

We keep the abducting stabilizer for 6 weeks, unless the patient is a professional sportsman and does a lot of throwing – in that case we keep it for 4 weeks. After 6 weeks we start stretching exercises: we start with the full flexion to the front, but the external rotation should be limited in the middle, when compared to the healthy side. We follow this limitation for 3 months after the surgery. Exception to the rule: the dominant arm of sports people. Here we can gradually add resistance (about 10° tolerance). Strengthening exercises can be introduced 6 weeks after the surgery. Exception to the rule: "remplissage", where strengthening exercises can be introduced only 3 months after the surgery.

COMBINED INJURIES**SLAP and the rotator cuff.**

We use the stabilizer for 6 weeks. If the rotator cuff injury isn't extensive, we immediately start "moving on the table" and passive external rotation exercises. If the injury is extensive, we begin with "moving on the table" 6 weeks after the surgery. At the end of the 6th week we remove the stabilizer. We introduce stretching exercises on a rope. Active arm raising can be introduced 3 months after the surgery. We start strengthening exercises in the 3rd month. If the rotator cuff damage is extensive, we start strengthening after 4 months.

Reconstruction of the SLAP injury and correction of the Bankart tear

Rehabilitation procedures are the same as in the case of correction of instability. If there's an additional "remplissage" procedure, we begin with strengthening exercises 3 months after the procedure.

Reconstruction of the rotator cuff and of the Bankart tear at the same time

We keep the stabilizer for 6 weeks, limit the external rotation to 0°. At the end of the 6th week we begin stretching exercises with a rope. Passive external rotation exercises are introduced after 3 months, to the middle point of the range of motion (of the healthy arm). We start strengthening exercises after 3 months. If the rotator cuff damage was extensive, we start strengthening after 4 months.

Instability surgery according to Latarjet

We keep the stabilizer for 6 weeks. After 6 weeks we take it off and start passively raising the arm above the head. We also start passive external rotation exercises to the middle point of range of motion on the other side. We don't increase the range

up to 3 months after the surgery. If an X-ray shows the graft is in the proper position, we start strengthening exercises. 6 months after the surgery, if the graft is well consolidated with the acetabulum, the patient may start raising weights at the gym. It's best when patients go back to doing sports 1 year after the surgery. We do X-ray tests after 6 weeks, 3, 6 and 12 months.

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