

Sports Therapy
Manual Therapy
Electrotherapy
Manipulation
Rehabilitation
Pre-habilitation
Clinical Pilates
Pre-Season Screening
Exercise Prescription
Massage

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AUSTRALIAN
PHYSIOTHERAPY
ASSOCIATION

Member

POST-OPERATIVE PHYSIOTHERAPY INFORMATION

Open Rotator Cuff Repair

Use of Sling:

The sling may be required to rest and support the shoulder for a period of 4-6 weeks following surgery, or until advised by your surgeon. During this time you must remove your arm from the sling 4-5 times per day to perform the following exercises as demonstrated by your physiotherapist. You may like to use the sling for a little while longer whilst in crowds if your shoulder remains painful as a “warning sign” for others to keep clear!

Precautions

No active lifting/ movements of your operated arm for 6 weeks. Due to the surgical approach to the shoulder, your deltoid muscle is detached and needs time to heal after your surgeon sutures back to the bone.

No lifting more than 1 kg. If you have also had a biceps tenodesis, you will not be able to hold anything more than 1kg as this will put too much load on the biceps tendon which has been reattached.

The repaired tendons also need time to heal and strengthen following surgery. The following exercises prescribed by your physiotherapist are safe to perform during this period and help prevent your shoulder stiffening/ freezing up too much.

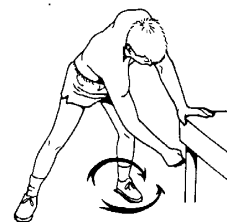
EXERCISES: The following exercises are to be performed 3-4 times each day, and are aimed at preventing stiffness in any of the arm joints, in the time while you are wearing your sling. Do not push any of the exercises to the point of pain.

1.Elbow, Wrist and Hand Movements – Day 1 onwards

Be sure to keep the elbow, wrist and hand mobile by bending and straightening all joints. It is much easier to keep these joints moving now than to let them get stiff. You can also begin gripping a stress ball or squash ball to keep your arm muscles strong and begin activity around the shoulder.

2.Pendular Swings - Day 1/2 onwards

Stand beside a table/ bench and support yourself firmly with your uninjured arm. Bend forward from the hips to allow your injured arm to hang free. Swing the arm gently forward/ backwards 10 times, side to side 10 times and in circles 10 times.



3.Shoulder (scapula) retraction – Day 1 onwards

Pull shoulder blades back gently and pinch them together. Keep shoulders down away from ears. Hold for 5 seconds and repeat 10 times.



4. Passive Shoulder Flexion – Day 2 onwards

Cradle your operated arm in your uninjured arm. Using your uninjured arm to take all the weight, raise your arms together to the front (flexion). Try not to let the point of your shoulder move upwards too far towards your ear – you can check this by doing this exercise initially in front of a mirror.

Note: Move only to the point of pain, and do not let your operated arm contribute to the movement for 4 weeks in order to protect the healing tendons.

It is advised that you begin this exercise in lying, progress to sitting and then to standing. Let pain guide this progression.



4-6 weeks

Intermittent use of sling as comfort allows you. You may find it necessary towards the end of the day as you get tired, and especially whilst in crowded areas.

Continue with exercises as above. You may commence gentle formal physiotherapy treatment in this time if your surgeon allows, however it most commonly begins after 6 weeks.

Dressings:

Your wounds are covered by waterproof dressings prior to being discharged from hospital. They are fine to shower with, but cannot be immersed in water. You need to leave these dressings on until you review with your surgeon.

Ice:

In the first week following surgery, ice is an important way of minimising swelling and inflammation around the shoulder, and decreasing discomfort. Ice should be applied to the front and top of your shoulder for 15 minutes at a time, 4 times each day. Always place a thin wet cloth between the ice pack (commercial gel pack, or bag of frozen peas) and your skin to prevent burns.

Further Physiotherapy and Rehabilitation

The shoulder is a very complex joint which requires excellent muscle function to achieve full, pain free movement. The joint itself is very unstable without strong muscles, and has been likened to a golf ball sitting on a horizontal golf tee! Therefore, you will generally be required to attend further physiotherapy for a progressive regime of exercises to help strengthen and mobilise your shoulder. Your surgeon will advise you as to when you should begin your further rehabilitation. This is generally from 6 weeks onwards, however some very gently physiotherapy may be commenced from 4 weeks post-operatively if your surgeon approves.