



Thomas Obermeyer, M.D.



BARRINGTON
Orthopedic Specialists
Specializing in You

obermeyermd.com

O: 847-285-4318

F: 847-885-0130

Rehabilitation Instructions:

Rotator Cuff Tendinopathy/Partial Tears (Nonoperative Treatment)

Instructions:

Manual therapy: Increase joint mobility to improve flexion, abduction, internal rotation, and external rotation

- Focus on joint mobilization as appropriate per patient for shoulder, shoulder girdle, cervical spine and upper thoracic spine
- Stretch/release the pectoralis major and minor, upper trap, sternocleidomastoid, and scalenes.

Range of motion: Progress from active assisted range of motion to active range of motion

- Focus on increasing range of motion via active assisted and active range of motion, with an emphasis on forward elevation, abduction, external rotation, and internal rotation
- When working on flexion please block scapulothoracic and emphasize glenohumeral motion
- Work to stretch the anterior and posterior capsule as needed per patient
- No range of motion limitations
- Mild discomfort while pressing into end-ranges is ok, but frank pain is not
- Assist the patient in relaxation of the upper trapezius

Strengthening: Achieve increased shoulder strength

- Ok to incorporate active range of motion and strengthening per therapist's preference, with no specific limitation; however, focus upon motion and not upon strengthening initially
- Begin by assuring the patient has adequate core and periscapular strength/stability
- Strengthen the rotator cuff muscles
- If patient presents with limited forward elevation Jackins' exercises should be used

Home exercise program: Please provide with a home exercise program (daily stretches, 3x/wk strengthening)

- Once the patient advances past manual therapy, may progress to a home exercise program exclusively

Modalities: Heat, massage, pain medications (NSAID) before exercises and ice after