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Shoulder Arthroscopic Rotator Cuff Repair

Arthroscopic Rotator Cuff Repair: Surgery & Recovery Guide

An **arthroscopic rotator cuff repair** is a **minimally invasive procedure** used to fix torn rotator cuff tendons in the shoulder. This technique involves small incisions and a camera (arthroscope), allowing the surgeon to reattach the tendon to the bone with sutures and anchors.

Surgery Process

1. Preoperative Preparation

- **Medical Evaluation:** Blood tests, imaging (MRI, X-ray, ultrasound).
- **Medications:** Blood thinners may need to be stopped.
- **Anesthesia:** General anesthesia (often combined with a regional nerve block).
- **Fasting:** No food or drink after midnight before surgery.

2. Surgery (Lasts 1–2 Hours)

- **Small Incisions:** 3–5 tiny cuts (~¼ inch each) are made on the front, back and side of the shoulder.
- **Arthroscopic Camera Insertion:** A **tiny camera** is inserted to guide the procedure.
- **Tendon Repair:**
 - Torn tendons are **reattached** to the bone using small **suture anchors**.
 - Anchors (made of metal or biodegradable material) hold the tendon in place.
- **Closure:** Stitches or surgical tape are applied, and the arm is placed in a **slings**.
 - A waterproof dressing is applied. You may shower right away and leave the dressing in place.

Recovery Course

1. Immediate Postoperative (Hospital Stay: Outpatient or 1 Night)

- **Pain Management:**
 - **Nerve block** provides **12–24 hours** of pain relief.
 - Oral pain medications (NSAIDs, acetaminophen, or opioids if needed).
- **Slings Usage:** Required **24/7 for 4–6 weeks** (except for therapy and hygiene).

- **Early Passive Motion:**
 - **Physical therapy (PT)** may begin **within the first week** with **gentle, passive movements**.
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2. Weeks 1–6 (Healing & Passive Movement)

- **PT Goals:** Maintain **range of motion (ROM)** and prevent stiffness.
 - **Exercises (Passive Only):**
 - **Pendulum exercises** (gentle shoulder circles).
 - **Passive forward elevation & external rotation** (assisted by therapist or other arm).
 - **Restrictions:**
 - ✗ **No active arm movement.**
 - ✗ **No lifting, pushing, or pulling.**
 - ✗ **No reaching behind the back or overhead.**
 - **Sleeping Tips:**
 - Sleep in a **reclined position** (propped pillows or recliner).
 - Keep the sling on while sleeping.
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3. Weeks 6–12 (Active Motion & Strengthening)

- **Gradual Active Motion:**
 - Start using the arm **without assistance** for simple tasks.
 - PT focuses on **active range of motion (AROM)** exercises.
 - **Light Strengthening (Around Week 10–12):**
 - Resistance bands, light dumbbells (1–2 lbs).
 - Shoulder blade stabilization exercises.
 - **Sling Discontinuation:** Typically around **6 weeks**.
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4. Months 3–6 (Strength & Function)

- **Increased Use of Arm:**
 - **Lifting limit increases to 5–10 lbs.**
 - Functional daily activities (dressing, eating, light household work).
 - **Advanced Strength Training:**
 - Resistance bands and **dumbbell exercises (3–5 lbs)**.
 - Focus on **rotator cuff and scapular stability**.
 - **Return to Activities:**
 - **Driving:** Around **8–12 weeks**.
 - **Sports:** Swimming, light golf, and non-contact activities around **4–6 months**.
 - **Heavy lifting/contact sports:** May take **6–12 months** or be permanently restricted.
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5. Full Recovery (6+ Months)

- **Most patients regain full function by 6–12 months**, though some **mild weakness or stiffness** may remain.

- **High-Risk Activities:** Heavy lifting, throwing, or repetitive overhead work may be **permanently restricted** depending on the severity of the tear.

Potential Risks

- **Re-tear of the tendon** (higher in larger or degenerative tears).
- **Frozen shoulder (stiffness due to immobility).**
- **Nerve injury or infection** (rare but possible).