

Anatomic Total Shoulder Arthroplasty Protocol

Phase 1	Surgery to 3 weeks post-op
Rehabilitation Goals	<ul style="list-style-type: none"> • Maximum Protection Phase
Precautions	<ul style="list-style-type: none"> • Sling use – MD directed • Keep the incision clean and dry
Suggested Therapeutic Exercise/Treatment	<p>Range of Motion Activities</p> <ul style="list-style-type: none"> • Pendulum exercises in sagittal and transverse planes • Passive supine elevation with therapist or with spouse / significant other after instruction or with opposite hand or performed seated at a table • Passive supine external rotation with therapist or with spouse / significant other after instruction or with opposite hand or performed seated at a table limited to 30° (ensure elbow is in the plane of the shoulder or anterior to the shoulder plane when supine) – shoulder should not be positioned in more than 45° abduction during this exercise • Hand, wrist, elbow ROM and PRE's <p>Muscular Activation</p> <ul style="list-style-type: none"> • Scapular AROM / isometric/stabilization exercise in protective range – for scapular elevation, protraction, retraction, depression (pain free) • Deltoid isometrics submaximal and pain free in neutral at glenohumeral joint

Total Shoulder Arthroplasty Protocol

Phase 2	Weeks 3 to 6 post-op
Rehabilitation Goals	<ul style="list-style-type: none"> Moderate Protection Phase
Precautions	<ul style="list-style-type: none"> Sling use – MD directed
Suggested Therapeutic Exercise/Treatment	<p>Range of motion</p> <ul style="list-style-type: none"> Passive supine elevation with therapist or with spouse/significant other after instruction or with opposite hand or performed seated at a table May use wand for supine elevation and external rotation (ensure elbow in the plane or anterior to the plane of the shoulder) Passive supine external rotation with therapist or with spouse / significant other after instruction or with opposite hand or performed seated at a table limited to 30° (ensure elbow is in the plane or anterior to the shoulder plane when supine) Joint mobilizations for inferior glide and glenohumeral joint lateral distraction (no greater than Grade III and must be pain-free) <p>Muscle activation</p> <ul style="list-style-type: none"> Flex / ABD / ER / IR submaximal pain-free isometric muscle contraction Weight shifts using table/counter or physio ball with arm below horizontal Progress deltoid isometrics <p>May initiate hydrotherapy (pool exercises) AAROM once incisions heal</p>

Total Shoulder Arthroplasty Protocol

Phase 3	Weeks 6 to 14 post-op
Rehabilitation Goals	<ul style="list-style-type: none"> • Early Strengthening Phase
Precautions	<ul style="list-style-type: none"> • Sling use – MD directed
Suggested Therapeutic Exercise/Treatment	<p>Range of motion activities</p> <ul style="list-style-type: none"> • Passive supine elevation with therapist or with spouse/significant other after instruction or with opposite hand or performed seated at a table • Passive supine external rotation with therapist or with spouse / significant other after instruction or with opposite hand or performed seated at a table. • Joint mobilizations for inferior glide and glenohumeral joint lateral distraction (no greater than Grade III and must be pain-free) • No pulleys • No forward elevation or abduction strengthening in the prone position <p>Muscle activation</p> <ul style="list-style-type: none"> • Flex / ABD / ER / IR pain-free isometric muscle contraction with the increased force of contraction (must be pain-free). Perform deltoid, flexion, and abduction isometrics at 30 degrees elevation in plane of scapula • Advance weight shifting exercises using table/counter or physioball (pain-free) – no pushup position during this phase unless on knees • Initiate active IR / ER in side lying and standing (ensure glenohumeral joint is in neutral – not extended) and maintain good trunk alignment. May progress to theraband for home exercises • Upper body ergometry • Initiate humeral head stabilization exercises (rhythmic stabilization) • Dr. Baumgarten patients - Incorporate Jackins exercise progression method

Total Shoulder Arthroplasty Protocol

Phase 4	Weeks 15 to 22 post-op
Rehabilitation Goals	<ul style="list-style-type: none"> • Late Strengthening Phase • Maintain full shoulder range of motion • Recovery of intermediate-level functional activity • Advance muscle strengthening resistance activities
Suggested Therapeutic Exercise/Treatment	<ul style="list-style-type: none"> • Continue to progress ROM and flexibility (1-2x daily) • Muscle-strengthening activities • Progress resistance to 12-15RM and 2 sets for each exercise • Progress rotator cuff isotonics as tolerated (1x daily as able or every other day as appropriate) • May perform upright theraband scaption exercises (full can) when able to perform upright active forward elevation to 130° • Upper extremity PRE's for large muscle groups; pecs, lats, etc. (1x daily as able or every other day as appropriate) • Initiate plyometric exercises below horizontal (1x daily as able, or every other day as appropriate) • Advance scapular stabilization strengthening activities to intermediate level as tolerated (1x daily) • Increased weight bearing in quadruped position only by lifting non-operative arm forward (must be pain free)