

Reverse Total Shoulder Arthroplasty Protocol

Phase 1	Surgery to 6 weeks post-op
Rehabilitation Goals	<ul style="list-style-type: none"> • Recovery of PROM of the shoulder • Maintain full function of elbow, wrist, and hand through AROM • Isometric activation of all components of the deltoid and periscapular muscles
Precautions	<ul style="list-style-type: none"> • Sling use – MD directed • Dr. Baumgarten patients - No Pendulum exercises • Avoid shoulder hyperextension, especially when combined with IR and/or adduction (reaching behind the back) • Encourage patient to use operative extremity to eat and write as needed, but should not actively raise the arm • Patients allowed to perform basic ADLs with operative upper extremity • Keep the incision clean and dry • No supporting body weight with the involved extremity
Suggested Therapeutic Exercise/Treatment	<p>Day 1-4</p> <ul style="list-style-type: none"> • Begin PROM – primary focus during this phase of rehab • Encourage consistent PROM with home program <ul style="list-style-type: none"> ○ Instruct family member in PROM to be performed while patient is supine or reclined ○ Focus on forward flexion and elevation in the scapular plane ○ External rotation (ER) in scapular plane (30° flexion and 30° abduction) to available ROM. Surgeon may specify a limit for ER, typically around 20-30°. ○ Gentle internal rotation (IR) in scapular plane. Keep arm in 30° of flexion during IR. Avoid combining extension with IR as this is a position of possible dislocation. • AROM of cervical spine, elbow, wrist and hand. Ensure elbow is above the level of the shoulder when performing distal ROM activities in supine. • Sub-max isometrics of periscapular muscles. Resist scapular protraction, retraction and elevation. • Cryotherapy 4-5 times per day for 20 minutes.

<p>Suggested Therapeutic Exercise/Treatment</p>	<p>Day 5-21</p> <ul style="list-style-type: none"> • Continue with PROM – still primary focus of rehab. May begin other methods of PROM such as: Sliding arm into flexion on table by leaning body forward, reciprocal pulleys • Continue with periscapular isometrics • With shoulder in supported position in supine, add light resistance for elbow, wrist and hand exercises. Including gentle gripping/squeezing activities. • Frequent cryotherapy at least 3 times per day. <p>Week 3-6</p> <ul style="list-style-type: none"> • Progress PROM and add supine cane exercises – still primary focus of rehab. • Begin sub-maximal pain-free deltoid isometrics in scapular plane. • Continue with cryotherapy
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Phase 2	Weeks 6 to 12 post-op
Rehabilitation Goals	<p>AROM, Early Strengthening Phase</p> <ul style="list-style-type: none"> • Continue progression of PROM • Restore AROM • Control pain and inflammation • Allow continued healing of soft tissue / do not overstress healing tissue • Re-establish dynamic shoulder stability
Precautions	<ul style="list-style-type: none"> • Continue to avoid shoulder hyperextension, especially when combined with IR and/or adduction (reaching behind the back) • Restrict lifting to light items, like an 8-ounce cup of coffee or glass of water • No supporting body weight with involved upper extremity
Suggested Therapeutic Exercise/Treatment	<p>Week 6-8</p> <ul style="list-style-type: none"> • Promote increase shoulder ROM <ul style="list-style-type: none"> ○ Continue with PROM program ○ Gentle GH and scapulothoracic joint mobilizations as indicated (grade I and II) • Begin shoulder muscle activation and strengthening <ul style="list-style-type: none"> ○ AA/AROM as appropriate for forward flexion and elevation in scapular plane in supine with progression to 45° reclined then sitting/standing ○ ER and IR in scapular plane in sitting/standing with progression to side lying ER at the end of the 8th week. ○ Progress deltoid isometrics and begin rhythmic stabilization in supine ○ Progress strengthening of elbow, wrist and hand with an emphasis on biceps and triceps strengthening ○ End of 8th week, begin periscapular and deltoid sub-maximal pain-free isotonic strengthening • Encourage patient to use operative extremity for light activities of daily living

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Suggested Therapeutic Exercise/Treatment	<p>Week 9-12</p> <ul style="list-style-type: none"> • Continue with above exercises and functional activity progression • Begin AROM forward flexion and elevation in the scapular plane with light weight progressing from supine, 45° recline (lawn chair), to sitting/standing • Progress to gentle GH IR and ER isotonic strengthening
Criteria for Progression to Phase III	<ul style="list-style-type: none"> • Improving function of shoulder. Examples are reaching for controls on the dashboard of the car, reaching to turn knobs on the stove, using extremity to wash and comb hair • Patient demonstrates the ability to isotonicly activate all components of the deltoid and periscapular plane

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Phase 3	Weeks 12 to 16 post-op
Rehabilitation Goals	<ul style="list-style-type: none"> • Enhance functional use of the operative extremity and advance functional activities • Examples are reaching to place items in the cupboard, using involved extremity for folding clothes, dusting, washing dishes, sewing, light vacuuming, turning a steering wheel, opening doors, carrying a laundry basket • Enhance shoulder mechanics, muscular strength, power and endurance
Suggested Therapeutic Exercise/Treatment	<ul style="list-style-type: none"> • Continue with the previous program as indicated • Progress to gentle resisted flexion and elevation in standing as appropriate

Phase 4	4+ months post-op
Rehabilitation Goals	<ul style="list-style-type: none"> • Home exercise program to be performed 3-4 times per week • Continue strength gains • Continue progression toward a return to functional and recreational activities staying within the limits identified by progress in therapy and as outlined by surgeon
Criteria for Discharge from Skilled Physical Therapy	<ul style="list-style-type: none"> • Patient is able to maintain pain-free shoulder AROM, demonstrating proper shoulder mechanics • Return of functional abilities such as reaching the bottom shelf in cupboards