

REHABILITATION PROTOCOL FOR TOTAL SHOULDER ARTHROPLASTY

APPOINTMENTS:

- Clinic appointments at 2 weeks, then at 6 weeks, 12 weeks, 18 weeks, 6 months, and 1 year
- Physical therapy appointment starting at 2 weeks, lasting 12 to 18 weeks

ACUTE PHASE: Surgery to 2 weeks post-op

- Immobilize the shoulder in the abduction sling
- Remove sling 5 times a day to work on range of motion exercises for the hand, wrist, and elbow and work on shoulder shrugs and pendulum exercises
- Ice as needed
- Work restrictions: no use of the arm

PHASE I: 2 to 4 weeks post-op

- Gradually wean out of the sling during the day but continue wearing it at night for 6 weeks
- Continue pendulum exercises
- Begin physical therapy and continue exercises at home daily:
 - Pulley for passive flexion and abduction to 90 degrees
 - Table slides for passive flexion and abduction
 - Passive ROM with cane for flexion/extension adduction, and internal rotation/external rotation
 - Towel stretch for internal rotation
 - Isometric strengthening
 - Modalities as needed: heat, ice, ultrasound, e-stim
 - NO ACTIVE EXTERNAL ROTATION
 - Limit external rotation to neutral
 - Limit abduction and flexion to 90°
- Work restrictions: no use of the arm

PHASE II: 4 to 6 weeks post-op

- Continue pendulum exercises
- Continue physical therapy and home exercises:
 - Continue pulley for passive flexion and abduction; progress to 180 degrees
 - Begin supine AAROM with therapist for flexion/extension, abduction/adduction, internal rotation/external rotation at 0 degrees abduction
 - Begin passive resistive exercises for flexion/extension, abduction/adduction, internal rotation/external rotation at 0 degrees abduction using therabands
 - Standing supraspinatus exercise to 90 degrees with gravity resistance only
 - PNF diagonals below 90 degrees, light resistance theraband
 - Light closed chain and scapular exercises
 - Goal of FROM at end of phase II
 - Limit external rotation to neutral
 - Full abduction and flexion
- Work restrictions: no use of the arm

PHASE III: 6 to 12 weeks post-op

- No lifting greater than 5 pounds
- Continue physical therapy and home exercises:
 - Continue P/AA/AROM stretches
 - Continue pulley for passive flexion and abduction to 180 degrees
 - Begin supraspinatus passive resistive exercises
 - Progress internal rotation/external rotation passive resistive exercises to 90 degrees abduction
 - Weight training for biceps, triceps
 - No lifting greater than 5 pounds
- Work restrictions:
 - Limited overhead use
 - No lifting, pushing, or pulling greater than 5 pounds

PHASE IV: 12 to 24 weeks post-op

- No lifting, pushing, or pulling greater than 15 pounds until 18 weeks post-op and then no lifting greater than 25 pounds until 6 months post-op
- Continue physical therapy, transitioning to home exercise program if able
 - Passive resistive exercises including isolated supraspinatus strengthening and prone external rotation at 90 degrees
 - Global strengthening
 - Begin work-related or sports-specific conditioning
 - Progress to work hardening/functional capacity evaluation if appropriate
- Work restrictions
 - No lifting, pushing or pulling greater than 15 pounds until 18 weeks post-op and then no lifting greater than 25 pounds until 6 months post-op
 - Goal of return to work without restrictions at 6 months post-op