REHABILITATION GUIDELINES FOR TOTAL SHOULDER REPLACEMENT

PHASE I (0-6 WEEKS) DATES:

Appointments	• Physical therapy 2 x per week
Rehabilitation Goals	• Allow healing of soft tissue • Gradually improve PROM of the shoulder and restore AROM of elbow, wrist, hand • Reduce pain and edema • Maintain integrity of replaced joint
Precautions	• Sling at all times with exception of shower and PT exercises (sling 3-6 weeks-specified in op report) • While supine, small pillow or towel behind elbow to prevent hyperextension/anterior capsule stretch • No AROM shoulder • No reaching hand behind back • No active IR • ER 45 deg unless stated otherwise in OP note • No supporting body weight on hands
Suggested Therapeutic Exercises	• Pendulums • PROM table slides into flexion • PROM ER to 45 degrees in scapular plane • PROM IR • Active elbow, wrist, hand exercises
Cardiovascular Exercises	• Light walking if balance is good enough to walk while in shoulder sling
Progression Criteria	• Tolerates PROM • Has achieved PROM of at least: 90 degrees for forward flexion and scaption, 45 degrees ER in the plane of the scapula, 30 degrees IR in the plane of the scapula and 30 degrees abduction • If patient has not reached these degrees, aggressive stretching/mobilization is not indicated. Continue with gradual ROM and grade 1 mobilizations

TOTAL SHOULDER REPLACEMENT

PHASE II (6-12 WEEKS) DATES:

Appointments	• Physical therapy 2 x per week
Rehabilitation Goals	• Restore full passive ROM • Gradually restore active assist and active motion • Control pain, inflammation, and allow for continued soft tissue healing • Don't overstress the healing tissue • Re-establish shoulder stability • Okay to start shoulder IR
Precautions	• Wean out of sling • Continue to place a small pillow or towel behind the elbow while supine to avoid shoulder hyperextension • Avoid repetitive exercises against gravity if poor shoulder mechanics are present • No heavy lifting greater than 5 pounds • No upper body weight bearing
Suggested Therapeutic Exercises	• Initiate AAROM exercises with pulleys and pole • Begin pain free AROM in gravity minimized positions at 8 weeks • Sub-maximal pain free shoulder isometrics • Progress distal extremity exercises to light resistance • Initiate assisted shoulder behind the back stretch at 8 weeks • Progress to Thera band and resisted exercises later in the phase as appropriate • Golf (chip and putt)
Cardiovascular Exercises	• Walking • Can start light arm bike at 8 weeks
Progression Criteria	• Tolerates PROM/AAROM, isometric exercises • Has achieved PROM of at least: 140 degrees forward flexion and scaption, ER of 60 degrees, IR of 70 degrees in the scapular plane • Able to actively elevate shoulder against gravity to 100 degrees

PHASE III (12-18 WEEKS) DATES:

Appointments	• Depending on progress, can continue 2 x per week or phase to 1 x per week

Rehabilitation Goals	• Gradual restoration of shoulder strength, power, endurance • Optimize neuromuscular control • Gradual return to ADLs and functional activities
Precautions	• No heavy lifting
Suggested Therapeutic Exercises	• Continue progression or resisted exercises and dynamic stability • Initiate weight bearing exercises
Cardiovascular Exercises	• Arm bike • Walking
Progression Criteria	• Good scapular control without upper trap substitution • Return to ADLs without difficulty

PHASE IV (4-6 MONTHS) DATES:

Appointments	• Continue physical therapy 1 x per week or discharge to independent home exercise program (HEP) at physical therapist's discretion
Rehabilitation Goals	• Patient has returned to advanced functional actives • Return to recreational hobbies and sports
Precautions	• None
Suggested Therapeutic Exercises	• Continue with advanced level exercises and discharge to independent HEP at the physical therapist's discretion
Cardiovascular Exercises	• Cardiovascular exercise of the patient's choice
Progression Criteria	• Return to full functional activities and sport

References: Brigham and Women's Hospital
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