

**REVERSE TOTAL SHOULDER REPLACEMENT
POST-OPERATIVE REHABILITATION PROGRAM**

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The goal of the rehabilitation process is to provide greater joint stability to the patient, while decreasing their pain and improving their functional status. The goal of the surgery & rehab (bone loss, muscle loss) is joint stability and less joint mobility. The key to the success of the rehabilitation following shoulder replacement is compliance to your exercise program.

Precautions: Should be implemented for the first 12 weeks following surgery- unless the surgeon specifically advises the patient differently.

- No shoulder motion behind back (back pocket motion)
- No excessive shoulder horizontal abduction
- No active external rotation behind head or neck
- No shoulder extension beyond the body

I. PHASE ONE - IMMEDIATE PROTECTED MOTION PHASE (Week 0-6)

Goals: Allow early healing of capsule
Restore passive range of motion
Decrease shoulder pain
Retard muscular atrophy
Patient education

Weeks 0-2

Exercises:

- *Sling during day and at night (worn for 4 weeks)
- *Continuous Passive Motion (CPM)
- *Passive Range of Motion
 - a. Flexion (0-60 degrees)
 - b. ER (at 30 degrees Abduction) 0 degrees
 - c. IR (at 30 degrees Abduction) 30 degrees
- *Pendulum Exercises
- *No active shoulder motion
- *Elbow/Wrist AROM
- *Gripping Exercises
- *Isometrics
 - a. Abductors
 - b. ER/IR
- *Cryotherapy for pain
- * *When laying supine use pillow under arm to support glenohumeral joint*

Weeks 3-4

- *Continue sling as needed
- *Continue PROM
 - a. Progress flexion to 90 degrees
 - b. ER/IR at 30 degrees abd scapular plane
- *May initiate AAROM IR/ER
- *Pendulum exercise
- *Rope and pulley week 3 to 4
- *Continue isometric
 - a. Initiate rhythmic stabilization drills
- *Continue use of ice

II. PHASE TWO - ACTIVE MOTION PHASE (Week 6-12)

Goals: Improve Shoulder Strength

Gradually progress Active/Passive Range of Motion
 Decrease Pain/Inflammation
 Increase Functional Activities
 Do not over stress healing tissue

Weeks 6-8

Exercises:

- *Progress PROM
 - a. Flexion to 90-115 degrees
 - b. ER/IR at 45 degrees abduction scapular plane
 - c. IR
- *Progress AAROM ER/IR at 45 degrees abd
- * **Do not aggressively push ROM into ER**
- *Continue rope and pulley to tolerance
- *Pendulum exercises
- *Continue isometrics
 - a. ER/IR
 - b. Rhythmic stabilization
 - c. Initiate deltoid flexion/ext
- *Ice as needed

Weeks 9-12

- *Progress PROM to tolerance
 - a. Flexion to 120-125 degrees
 - b. ER/IR at 90 degrees abduction (goal is 45-50 degrees of ER motion)
 - c. ER/IR at 45 degrees abduction
- *Progress AAROM to tolerance
 - a. ER/IR at 45 degrees abd
 - b. Initiate flexion supine L-bar
- *Initiate AROM exercises
 - a. Sidelying flexion
 - b. Supine flexion
 - c. Sidelying ER
- *Continue strengthening and stabilization
 - a. Tubing ER/IR
 - b. Supine ER
 - c. Standing full can
 - d. Prone exercise
 - e. Biceps
- *May perform pool exercises
- *Continue rhythmic stabilization
 - a. Supine flex/ext
 - b. Supine ER/IR

III. PHASE THREE – MODERATE STRENGTHENING/ACTIVITY PHASE (WEEKS 12-16)

Goals:

Gradually increase PROM
 Initiate active light strengthening exercises
 Gradually initiate functional activities
 Continue precautions with excessive GH joint motion

Exercises:

- continue all exercises listed above
- Initiate light active ROM exercises
- Initiate fundamental shoulder program,

IV. PHASE IV – RETURN TO ACTIVITY PHASE (WEEKS 16- 26)

*Initiation of this phase begins when patient exhibits:

- 1) PROM: Flexion 0-145 degrees
ER (at 90 degrees Abduction) 33-55 degrees
IR (at 90 degrees Abduction) 45-55 degrees
 - 2) Strength level 4/5 for ER/IR/abd
- * Note: Some patients will not be able to enter this phase

Goals: Improve strength of shoulder musculature
Improve and gradually increase functional activities
Gradual restoration of functional activities
Independent home exercise program

Exercises:

- *fundamental shoulder exercise program
- *May continue pool exercises
- *Should exercise daily
- * May initiate interval sport program (golf, swim) Physician must approve

KEW: 12/08