HaysMed

Total Shoulder / Reverse Total Shoulder Replacement

General Principles:
This protocol was designed to provide the rehabilitation professional with a guideline of postoperative care. It should be stressed that this is only a protocol and should not be a substitute for clinical decision making regarding a patient's progression. Actual progression should be individualized based upon your patient's physical examination, progress, and presence of any complications.

The following routine **Reverse Total Shoulder Precautions** should be observed at all time:

1. **No horizontal adduction for 6 weeks**
2. **No reaching behind the back for 10 weeks**
3. **Recommend golfers hit only off of a tee for 1 year**

PHASE I: (Immediate)

Week 1

Orthotics-

1. Shoulder immobilizer with abductor pillow at all times except for exercises

Modalities (PRN)-

1. Ice post-activity throughout protocol for pain and inflammation
2. Electrical Stimulation

ROM-

1. Wrist, Forearm, and Elbow Active/Passive ROM to full in all planes
2. Passive Shoulder ROM only
    a. Flexion, extension, abduction, adduction, horizontal abduction/adduction as tolerated
        i. Reverse Total shoulder – NO horizontal adduction for 6 weeks
    b. Internal rotation as tolerated at 0˚ of abduction only
    c. External rotation to 0˚ at 0˚ of abduction only

Exercises-

1. Active wrist, forearm, and elbow exercises, all planes
2. Hand grasping activities
3. Elbow and wrist Isometrics
4. Passive pendulum/codmans

PHASE II (Intermediate)

Week 2 - 6

Orthotics-

1. May discontinue use of sling at night at **Week 3**
2. Discontinue use of sling at **Week 4**

Modalities (PRN)-

1. Continue Phase I modalities as needed

(cont'd weeks 2-6)

ROM-

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1. Wrist, Forearm, and Elbow Active/Passive ROM to full in all planes
2. Shoulder Passive and Active Assistive ROM only
    a. Flexion, extension, abduction, adduction, horizontal abduction/adduction as tolerated
        i. Reverse Total shoulder – NO horizontal adduction for 6 weeks
    b. Internal rotation as tolerated in scapular plane only
    c. External rotation to 20˚ in scapular plane only

Exercises-
1. Continue to progress Phase I exercises as tolerated
2. Shoulder Isometrics (Sub-maximal, Sub-painful)
    a. Flexion, extension, abduction, adduction, external rotation
    b. May start Isometric Internal Rotation at **Week 6**
3. Light scapulo-thoracic stabilization exercises
4. Active Assistive ROM exercises
    a. Start in supine, progress to sitting/standing
5. Overhead pulleys
6. Elbow / Wrist progressive resistance exercises as tolerated
7. Aquatics for Passive and Active Assistive ROM

PHASE III (Strengthening)

Week 7 - 12

Orthotics-
1. None

Modalities (PRN)-
1. Continue Phase I modalities as needed

ROM-
1. Shoulder Active / Passive ROM
    a. Flexion, extension, abduction, adduction, horizontal abduction/adduction as tolerated
    b. Internal rotation as tolerated from 0˚ to 45˚ of abduction
    c. External rotation to 45˚ as tolerated from 0˚ to 45˚ of abduction

Exercises-
1. Continue to progress Phase II exercises as tolerated
2. Progress to Active shoulder ROM
3. Initiate resistive scapular strengthening
4. Shoulder progressive resistance exercises at **Week 10**
    a. Light resistance initially, may start with 2-8 oz weight
    b. High repetitions, low resistance
    c. Be sure to watch control and limit / prevent scapular substitution
5. Progressive resistance exercises for Internal Rotation / External Rotation at **Week 10**
    a. Reverse Total Shoulders at **Week 12**
5. Closed chain proprioception exercises (UE ranger)
6. Progress to functional ADL activities
7. Upper extremity bicycle – light resistance
8. Aquatics - Buoyancy assisted Active exercises

PHASE IV (Advanced Strengthening)

Week 13+

Modalities (PRN)-

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1. Only as needed

ROM-
1. Progress Shoulder ROM to full in all planes as tolerated

Exercises-
1. Continue to progress Phase III exercises as tolerated
2. May begin combined AROM exercises
3. Initiate functional activities and sports as tolerated
    a. Interval sports programs
4. Aquatics- Progress to Buoyancy or equipment resisted exercises
5. Avoid jamming activities such as hammering and contact sports

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