

Reverse Shoulder Arthroplasty Rehabilitation Protocol Dr. Samir Patel, MD

PREHABILITATION

- If Bicep Tenodesis- no resistive elbow flexion x6 weeks, limit lifting to less than a can of pop x 6 weeks
- Instruct to use ice 20-30 minutes every 3-4 hours while awake
- Pendulum exercise 2-3 times per day starting immediately following surgery
- Cryotherapy after pendulum exercises
- Arrange follow up PT/OT appt on 7th day post-op, to correspond with physician's post op evaluation

OUTPATIENT PHASE 1 (Surgery date – week 4)

ROM

- PROM forward elevation, abduction, ER
 - No ER >45 degrees
 - IR in scapular plane as tolerated; no IR behind back
 - No IR in abduction, extension or cross body adduction
- Joint mobilization of glenohumeral and scapulothoracic joints; grades I/II to patient tolerance
- Cervical, elbow and wrist ROM and grip strengthening
- Postural control exercises

STRENGTH

- Scapular retraction and depression
- Aerobic conditioning such as walking or stationary bike

SLING

- Discontinue sling after 1 week

OTHER

- Incision mobilization and desensitization
- Modalities for pain, inflammation and edema control (no e-stim)
- Cryotherapy

OUTPATIENT PHASE 2 (week 5-8)

ROM

- Continue above exercises
- No ER >45 degrees until week 6, then progress per tolerance
- AROM to tolerance

STRENGTH

- Light UBE for warm-up
- Submax isometrics (no IR or extension)
- Bicep/triceps strengthening with elbow supported, 5 pound limit

OTHER

- Continue scar massage
- 5 pound weight restriction

OUTPATIENT PHASE 3 (week 9-12)

ROM

- To tolerance
- Grade III/IV glenohumeral and scapulothoracic mobilization

STRENGTH

- Instruct in home program and begin isotonic deltoid strengthening, start with light resistance
- Start in non-impingement position and progress to increase degrees of abduction as tolerated
- Assess for substitutions and focus on anterior deltoid strength in combination with scapular retraction and depression
- Advance periscapular strengthening of posterior shoulder girdle
- Trapezius, rhomboids, latissimus dorsal, serratus anterior
 - UBE wight light resistance, especially in reverse direction to promote scapular strengthening
 - Closed chain scapular clocks, table top ball rolls and wall washes, if tolerated
 - Continue bicep and triceps strengthening
 - Continue aerobic conditioning

OUTPATIENT PHASE 4 (week 12-16)

ROM

- Pain free ROM exercises, NO STRETCHING
- Patient should be able to perform active elevation to 100 degrees, active abduction to 90 degrees

STRENGTH

- Progressive deltoid and periscapular strengthening
- Emphasize strengthening force couples
- UBE with progressive resistance
- erobic conditioning and core body strengthening

Dr. Samir Patel, MD

Date