

Rehabilitation after Reverse Total Shoulder Replacement

Phase One: 1 to 4 weeks after surgery

Goals:

1. Protect the shoulder and the soft tissue repair.
2. Ensure wound healing
3. Prevent shoulder stiffness
4. Regain range of motion
5. AVOID DISLOCATION – No combined shoulder extension/adduction/internal rotation (and example of this position is reaching to your back pocket with the arm – avoid this position!)

Activities:

1. Sling

Use your sling except for showers and the exercises below. Remove the sling 4 or 5 times a day to do **pendulum exercises**.

2. Use of the affected arm

You may use your hand on the affected arm in front of your body but ***DO NOT*** raise your arm or elbow away from your body. It is all right for you to flex your arm at the elbow.

Also:

No Lifting of Objects

No Excessive Shoulder Extension (do not reach arm behind the body) or External Rotation (rotate arm out away from body)

No Excessive Stretching or Sudden Movements

No Supporting of Body Weight by the Hands

3. Showering

You may shower or bath and wash the incision area immediately. To wash under the affected arm, bend over at the waist and let the arm passively come away from the body. It is safe to wash under the arm in this position. This is the same position as the pendulum exercise.

Exercise Program

1. ICE

Days per Week: 7

15- 20 minutes at a time

Times per Day: 4-5

2. PASSIVE MOTION (guided by physical therapist)

Program (See appendix for details):

Pendulum exercises

Supine passive arm elevation up to 120°

Gentle passive ER, limit to 30°

Scapular retraction

Ball squeeze exercise

Internal rotation to the chest wall

Active ROM of elbow/wrist/hand

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Phase Two: 5 to 10 weeks after surgery

Goals:

1. Protect the soft tissue repair
2. Improve range of motion of the shoulder (advance forward flexion to 150°, ER to 45°)
3. Begin active-assisted/active range-of-motion
4. Home exercise program

Activities:

1. Sling : Your sling is no longer necessary unless your doctor instructs you to continue using it.
2. Use of the operated arm
You may begin using the arm more for activities of daily living.
Avoid painful activities.
Avoid lifting more than 5-10 pounds.
Do not support your body weight with the arm.
3. Bathing and showering: You may shower and bath normally, avoiding painful movements.

Exercise Program:

The exercises listed below may be gradually integrated into the rehabilitation program under the supervision of your doctor and/or physical therapist.

1. Passive range of motion exercises
2. Active-assisted range of motion
 - ER Wand, Supine ER, Standing ER
 - Advance forward flexion to supine and standing
 - Pulleys
3. Active range of motion (once passive ROM goals are met)
 - Arm Forward Elevation (Supine and Standing Active-Assisted, progress to AROM)
 - Internal rotation at 6 weeks (behind-the-back IR)
4. Humeral Head control exercises
 - ER/IR (supine/scapular plane)
 - Elevation at 100 degrees
5. Hydrotherapy (if available)
 - Pool exercises: forward flexion (scapular plane), horizontal abduction/adduction
6. Isometrics (sub-maximal)
 - Deltoid in neutral
 - External rotation
 - Internal rotation at 6 weeks
7. Scapular strengthening exercises (Shrug, standing/seated row)

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Phase Three: 11-16 weeks after surgery

Goals:

1. Pain control with advanced activities of daily living
2. Regain motion (elevation to 160 degrees, ER to 60 degrees, IR to T12)
3. Improve muscle strength to 4/5
4. Restore scapulothoracic rhythm

Precautions:

Avoid painful activities

Avoid ranges of motion that encourage scapular hiking or poor biomechanics

Exercise Program

The exercises below may be gradually integrated into the rehabilitation program under the supervision of your doctor and/or physical therapist. Resistance for the dynamic strengthening exercises can gradually be added starting with 1 lb and should not exceed 3 lb at this time.

1. Progress range of motion as tolerated
2. Flexibility exercises
 - Supine passive arm elevation
 - Behind the back internal rotation
 - Supine cross-chest stretch
 - Side lying internal rotation stretch
 - Wall slide stretch
 - Avoid stress on anterior capsule
3. Hydrotherapy exercises (if available)
4. Isometrics
5. Scapular stabilization
6. Rhythmic Stabilization
- 7 Progressive resistive exercises for scapula, biceps, triceps
 - Therabands
 - Light weights/machines
 - Rowing
 - Chest press

Criteria for Advancement

Elevation to 160 degrees

ER to 60 degrees

IR to T12

Normal scapulothoracic rhythm at <90 degrees elevation

Strength 4/5

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Phase 4: 16 to 22 weeks after surgery

Goals:

1. Continue to protect the repair by avoiding excessive forceful use of the arm or lifting excessively heavy weights.
2. Restore full shoulder motion
3. Restore shoulder strength to allow activities of daily living
4. Gradually begin to return to normal activity

Precautions:

Avoid painful activities

Avoid lifting heavy objects

Exercise Program

1. Address remaining deficits in motion and strength
2. Active, Active-assisted, and passive ROM exercises
3. Flexibility exercises
 - Supine passive arm elevation
 - Behind the back internal rotation
 - Supine cross-chest stretch
 - Side lying internal rotation stretch
 - Wall slide stretch
4. Progressive resistive exercises
 - Dumbbells
 - Progressive Resistive Equipment
 - Therabands IR/ER
5. Rhythmic Stabilization
6. Sports/activity specific training
 - Return to golf and doubles tennis between 4-6 months once functional goals are met.

Criteria for Discharge

Maximize ROM

Full independence in ADL's

Normal scapulothoracic rhythm at >100 degrees elevation

Functional muscle strength achieved