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ORTHOPAEDIC SURGEON

– Sports Medicine Specialist –

Postoperative Rehabilitation Guidelines/Protocols Anatomic Total Shoulder Arthroplasty

0-4 Weeks:

- Sling Immobilization
 - Weeks 0-2 wear at all times, off for gentile exercises only
 - Weeks 2-4 wear daytime only
- Active ROM exercises to the Elbow, Wrist and Hand
- True Passive (ONLY) ROM Shoulder first 2 weeks.
 - Pendulums
 - Limit External Rotation to passive 45 degrees to protect subscapularis repair
 - NO active Internal Rotation and NO extension until 6 weeks
- Rotator cuff and deltoid isometrics ok to begin week 2
- Scapular Stabilization exercises (side lying)
- Deltoid isometrics in neutral (submaximal) as ROM improves

4-8 Weeks:

- Discontinue sling
- Begin Active Assist ROM and advance to Active as Tolerated
 - Elevation in scapular plane and external rotation as tolerated
 - No Internal rotation or behind back until 6 weeks post-op

8-12 Weeks:

- Active Assist ROM to Active ROM Shoulder as Tolerated
 - Elevation in scapular plane and external rotation to tolerance
 - Ok to begin resisted IR, extension and scapular retraction
 - Light stretching at end ranges
- Cuff Isometrics with arm at the side
- Upper Body Ergometer

12-24 Weeks:

- Advance to full ROM as tolerated with passive stretching at end ranges
- Advance strengthening as tolerated: isometrics bands light weights (1-5 lbs); 8-12 reps/2-3 sets per rotator cuff, deltoid, and scapular stabilizers
- Only do strengthening 3x/week to avoid rotator cuff tendonitis
- Begin eccentrically resisted motions, pylometrics (ex. Weighted ball toss), proprioception (es. body blade)
- Begin sports related rehab at 4 1/2 months, including advanced conditioning
- Maximal medical improvement usually at 12 months post-op