

TOTAL SHOULDER REPLACEMENT REHABILITATION PROGRAM

The goal of the rehabilitation process is to provide greater mobility to the patient than before the surgery. In addition, stability of the shoulder is vital and essential to normal non-painful shoulder function. The key to the success of the rehabilitation following total shoulder replacement is compliance to your exercise program.

PRECAUTIONS

- In hospital use immobilizer.
- Discontinue immobilizer at Day 1-3 and use sling for comfort for a few days
- No forceful internal rotation for 6 weeks for fear of disrupting subscapularis repair

I. PHASE ONE - IMMEDIATE MOTION PHASE (WEEK 0-4)

Goals

Allow early healing of capsule

Increase passive range of motion

Decrease shoulder pain

Retard muscular atrophy and prevent RTC inhibition

WEEKS 1- 2

- Sling for Comfort and Sleep (May discontinue sling as tolerated)
- Exercises:
 - Continuous Passive Motion (CPM)
 - Passive Range of Motion
 - Flexion (0-75 degrees)
 - ER (in scapular plane at 30 to 0 degrees)
 - IR (in scapular plane at 30 degrees to 25-30 degrees)
 - Pendulum Exercises
 - Elbow/Wrist ROM
 - Gripping Exercise for Hand
 - Ice & Modalities
 - Isometrics (Day 10)
 - Abductors
 - ER/IR
 - Elbow flexors
 - Electrical Muscle Stimulation (if needed)
 - Rope and Pulley (POD 5-7) - Flexion

CAUTION

Do not stressfully actively IR arm against resistance for possibility of pulling subscapularis repair for 4-6 weeks.

WEEKS 3-4

- Sling as Needed
- Exercises:
 - Continue all ROM exercises
 - Initiate AAROM exercises
 - Progress flexion to 90-100 degrees
 - ER scapular plane at 45 to 25 degrees
 - IR scapular plane at 45 degrees to side
 - Initiate AAROM ER/IR supine with L-bar
 - Initiate rhythmic stabilization exercises
 - Flex/Ext
 - ER/IR in scapular plane
 - Isometrics
 - ER/IR
 - Flex
 - Ext
 - Abd
 - Rope and Pulley

II. PHASE TWO - ACTIVE MOTION PHASE (WEEK 4-10)

Goals

Improve dynamic stabilization and strength

Improve Range of Motion

Decrease pain/inflammation

Increase Functional Activities

WEEKS 5-8

- Exercises:
 - Active Assisted ROM Exercises with L-Bar (Begin week 2)
 - Flexion to tolerance
 - ER in scapular plane at 90 degrees abduction
 - IR in scapular plane at 90 degrees abduction
 - All motions to tolerance
 - Rope and Pulley
 - Flexion
 - Pendulum Exercises

- AROM Exercises
 - Supine Flexion if unable sidelying flexion
- Strengthening Exercises
 - Tubing ER/IR
 - Rhythmic stabilization Flex/Ext and ER/IR
 - Sidelying ER
 - Sidelying flexion
 - Scapular strengthening exercises
 - Prone rowing
 - Prone extensions
 - Biceps/triceps
 - Isometrics for deltoid

WEEKS 9-12

- Continue all exercises listed above
- Prone goal:
 - Flexion 160 degrees
 - ER at 90 degrees Abd: 75-80 degrees
 - IR at 90 degrees Abd: 60-65 degrees
- Continue to emphasize AROM and strength
- Progress strengthening exercises
- Pool exercises and swimming

III. PHASE THREE - ACTIVITY PHASE (WEEKS 13-26)

*Initiation of this phase begins when patient exhibits:

- PROM:
 - Flexion 0-160 degrees
 - ER 75 degrees
 - IR 60 degrees
- Strength level 4/5 for ER/IR/ABD

Goals

Improve strength of shoulder musculature

Neuromuscular control of shoulder complex

Improve functional activities

- Exercises:
 - AAROM and stretching exercises
 - Flexion with L-bar
 - ER/IR at 90 degrees abduction

- Strengthening exercises
 - ER/IR tubing
 - Full Can
 - Lateral raises
 - Prone rowing
 - Sidelying ER
 - Prone extension
 - Biceps
 - Initiate interval sport program if appropriate (weeks 20-26)