

Reverse Total Shoulder Arthroplasty Rehabilitation Protocol

Prescription

- PT / OT 2 times per week x 16 weeks, starting post op week 3
- Ordering physician – Erick Marigi, MD (NPI: 1801393509)

Post op Week 0 – 3: Protective / Healing Phase

- Emphasize pain and swelling control, Icing program, 3 to 5 times a day, 40 minutes each after exercises
- FULL Passive ROM / Active assisted ROM / Active ROM of the elbow / wrist / hand
- NO ACTIVE USE OF THE OPERATIVE ARM OR THERAPY DIRECTLY TO THE SHOULDER DURING THIS TIME

Post op Week 3 – 6: PHASE 1 Protocol

- Emphasize pain and swelling control
- Wean out of the sling as comfort allows
- Therapist to introduce and teach the patient Pendulum / Codman exercises
- **PROM ONLY of shoulder with forward flexion up to 120° with neutral rotation and ER to 0°, as tolerated.**
 - NO SHOULDER IR, ADDUCTION OR CROSS BODY MOVEMENT
- FULL active ROM of the elbow / wrist / hand
- Teach Home Exercise Program –2 times per day

Post op Week 6 – 12: Phase 2 protocol

- **No driving until patient has normal use of the arm.**
- Active assisted ROM of shoulder (Forward Elevation, ER) without limits.
- Shoulder blade protraction (punches)
- Active ER with the elbow at the side (NO RESISTANCE)
- Active Forward elevation / Abduction (NO RESISTANCE)
- Biceps curls (2 lb. limit)
- Teach Home Exercise Program – 2 times per day

Week 12 +: Phase 3 protocol

- Once full PROM and AAROM is reached → Progress to full AROM in all planes (FE, ER, IR)
- Wall push ups for scapular control
- Isotonic strengthening (Internal rotation, External Rotation)
- Active ROM in forward elevation in the scapular plane with a 1 lb. weight
- Advance strengthening – Once safe and painless 2 lb. lifts → 5 lbs. → 10 lbs. max lifting restriction
- Teach Home Exercise Program – 3 - 5 times per day

This protocol is not meant to be prescriptive but a recommendation to guide the rehabilitation process.
Each patient's progress may vary based on specifics of their injury and procedure.

