



## Reverse Total Shoulder Arthroplasty Rehabilitation Protocol

Phase	Goals	Precautions / Restrictions	Treatment
<b>Weeks 0 – 3</b>	<ul style="list-style-type: none"> <li>Protect surgical site + repair</li> <li>Emphasize P.R.I.C.E.</li> </ul>	<ul style="list-style-type: none"> <li>PATIENT IS TO HAVE NO THERAPY TO SHOULDER DURING THIS TIME.</li> </ul>	<ul style="list-style-type: none"> <li>Elbow / Wrist / Hand – FULL PROM/AAROM/AROM</li> <li>Initial visit – FOTO PRO, QuickDASH</li> </ul>
<b>Weeks 3 – 6</b>	<ul style="list-style-type: none"> <li>Protect surgical site + repair</li> <li>Decrease pain + inflammation</li> <li>Initiate gentle, pain free, passive shoulder ROM</li> <li>Safely discontinue full use of the sling with the pillow at <b>week 6</b></li> </ul>	<ul style="list-style-type: none"> <li><b>No Active Shoulder ROM</b></li> <li>No lifting of any object</li> <li><b>Week 4</b> – Initiate a daytime wean of the sling when stationary at home or in a controlled environment.</li> <li><b>Until week 6</b> – Continue sling use when sleeping or out of the house</li> </ul>	<ul style="list-style-type: none"> <li>Introduce Shoulder Pendulum / Codman exercises</li> <li>Pain free shoulder <b>Passive ROM</b> with limits: <u>Forward elevation to 90° + External Rotation to 20°</u></li> <li>Monitor for sharp Acromial + Scapular Spine Pain <ul style="list-style-type: none"> <li>If present, then hold therapy for that week</li> </ul> </li> <li>Teach passive HEP (1 x per day)</li> </ul>
<b>Weeks 6 – 12</b>	<ul style="list-style-type: none"> <li>Maintain integrity of repair</li> <li>Progressively increase PASSIVE ROM → AA ROM → Active ROM with below goals by week 12: <ul style="list-style-type: none"> <li>Flexion 90° - 120°</li> <li>ER 0 - 45°</li> </ul> </li> <li>Improve muscle activation, motor control, and strength</li> <li>Teach AA HEP (1 x per day)</li> </ul>	<ul style="list-style-type: none"> <li>Discontinue sling at week 6</li> <li><b>Avoid forcing end range motion in any direction to prevent dislocation</b></li> <li><b>No weight bearing through the involved shoulder</b></li> <li>Biceps curls – 2 lb. limit <ul style="list-style-type: none"> <li>No Deltoid or RC strengthening</li> </ul> </li> <li>No driving until the patient has normalized their arm function</li> </ul>	<ul style="list-style-type: none"> <li>Progress pain free shoulder range of motion: <ul style="list-style-type: none"> <li>PROM → AAROM → AROM</li> </ul> </li> <li>Initiate scapular stability exercise</li> <li>Initiate shoulder isometrics (<u>FE and ER ONLY</u>): <ul style="list-style-type: none"> <li>No IR, may begin IR isometrics at week 12</li> </ul> </li> <li>Initiate manual resistance for isometrics or proprioceptive neuromuscular facilitation (PNF)</li> <li>Modalities PRN including cardiovascular endurance <ul style="list-style-type: none"> <li><b>NO UPPER BODY ERGOMETER</b></li> </ul> </li> <li>Week 6 – QuickDASH, FOTO PRO</li> </ul>
<b>Weeks 12 – 16</b> <b>(Months 3 – 4)</b>	<ul style="list-style-type: none"> <li>Progressively increase AA ROM → ACTIVE ROM with below goals by week 16: <ul style="list-style-type: none"> <li>Flexion 120° - 140°</li> <li>ER 30 - 50°</li> </ul> </li> <li>Improve strength of RTC and scapular stabilizers</li> <li>Improve endurance of RTC and scapular stabilizers</li> </ul>	<ul style="list-style-type: none"> <li>Increase scapular strengthening and stabilization starting with a 3 lb. → 5 lb. → 10 lb. max lifting restriction</li> <li>May use open kinetic chain as tolerated within restrictions and patient tolerance</li> <li>End range stretching gently w/o forceful overpressure in all planes (FE / ER in scapular plane, functional IR)</li> </ul>	<ul style="list-style-type: none"> <li>Initiate Rotator Cuff isotonic as able provided no shoulder compensatory patterns</li> <li>Add light hand weights for deltoid up to and not to exceed 3 lbs. for anterior and posterior deltoid with long arm lift against gravity <ul style="list-style-type: none"> <li>Elbow bent to 90° for abduction in scapular plane</li> </ul> </li> <li>Continue with cardiovascular endurance and core</li> <li>Incorporate soft tissue mobility / scar massage PRN</li> <li>Modalities PRN – <b>NO UPPER BODY ERGOMETER</b></li> <li>Week 12 – QuickDASH, FOTO PRO</li> </ul>
<b>Weeks 16 – 24</b> <b>(Months 4 – 6)</b>	<ul style="list-style-type: none"> <li>Maintain pain free ROM</li> <li>Improve strength and endurance of RTC and scapular stabilizers</li> <li>Increase functional activity</li> </ul>	<ul style="list-style-type: none"> <li>For recreational lifters, may slowly advance from 10 lb. restriction to 20 lbs.</li> <li>No heavy pushing or overhead sports</li> <li><b>NO UPPER BODY ERGOMETER</b></li> </ul>	<ul style="list-style-type: none"> <li>Week 16 – Continue Active Range of Motion <ul style="list-style-type: none"> <li>FOTO, QuickDASH</li> </ul> </li> <li>Advancement to isotonic exercise per tolerance in all planes, including multiplane exercises as long as: <ul style="list-style-type: none"> <li>Isometrics are progressing</li> <li>No compensations during exercise performance</li> </ul> </li> </ul>
<b>Weeks 24 +</b> <b>(Month 6+)</b>	<ul style="list-style-type: none"> <li>Focus on form and control during exercise performance</li> <li>Initiate return to sport progression and higher-level impact activity</li> </ul>	<ul style="list-style-type: none"> <li>Modify work, recreational or functional activity as necessary</li> <li>Progress up to 25 lb. operative arm maximum lifetime recreational lifting restriction</li> <li><b>NO UPPER BODY ERGOMETER</b></li> </ul>	<ul style="list-style-type: none"> <li>Continue with strength of total UE and scapular stabilizers being mindful of individual limitations</li> <li>Low level sport specific activity, progressing to higher demand activity</li> <li>Continue with Anaerobic + Aerobic interval training</li> <li>Week 24 – QuickDASH, FOTO, HDD / Isokinetics</li> </ul>

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.

