

Rehabilitation Guidelines following Reverse Total Shoulder Arthroplasty

Phase	Intervention	Goals and Criteria for Progression
<p>Weeks 0-6</p> <p>Exercises 4-6x/day</p> <p>PT starts about 1 week after surgery</p>	<p>Precautions:</p> <ul style="list-style-type: none"> • Sling continuously for 4 weeks except during therapy activities or desk work • Wean off sling at 4 weeks • Begin AROM at 4 weeks • No active IR for 6 weeks • ER limited to 0° <p>Physical Therapy:</p> <ul style="list-style-type: none"> • Elbow, wrist, hand, neck ROM • Ball squeezes • PROM for flexion, abduction • Pendulums • Forward Bow • Pain free submax isometrics for flexion, abduction, extension and ER <p>Cardiovascular: Bike or walking with sling on</p> <p>Ice, stim for pain</p>	<p>Stress importance of precautions and HEP</p> <p>Allow healing of subscapularis = no active IR/ER or ER stretching</p> <p>Control pain and inflammation</p> <p>Initiate ROM exercises, instruct family members</p> <p>Maintain elbow, wrist, hand ROM</p> <p>Reduce pain and swelling</p>
<p>Weeks 6-8 Post-Op</p> <p>PT 1-2x/week</p>	<p>Precautions:</p> <ul style="list-style-type: none"> • ER limited to 30° till week 6, 45° for weeks 7-8 <p>Physical Therapy:</p> <ul style="list-style-type: none"> • AAROM, PROM, AROM in all planes • Pain free low resistance shoulder isotonic Strengthening • Gentle rhythmic stabilizations • Shoulder mobilizations PRN • Scapular strengthening with arm neutral to 30° abduction • Cervical spine, scapular ROM, posture exercises <p>Cardiovascular: Walking or Bike</p> <p>Ice, stim for pain</p>	<p>Increase ADL activity</p> <p>Gradual restoration of AROM and PROM</p> <p>Activate scapular stabilizers from 0-30° abduction (prone row, prone shoulder extension)</p> <p>Address posture dysfunction</p>

<p>Weeks 8-12 Post-Op</p> <p>PT once every 1-2 weeks</p>	<p>Precautions:</p> <ul style="list-style-type: none"> • ER limited to 60° <p>Physical Therapy:</p> <ul style="list-style-type: none"> • Continue w/ previous phase exercises • Add rotator cuff strengthening • Deltoid strengthening • Scapular strengthening • Gentle closed chain shoulder and scapular stabilization activities (wax on, wax off; wall dribbles, etc.) • Side lying shoulder flexion • Scapular strengthening • Open chain rhythmic stabilization drills, PNF patterns 	<p>ROM to functional needs in all planes</p> <p>MMT of IR/ER 5/5 w/ arm in neutral</p>
<p>Weeks 12-16 Post-Op</p> <p>PT once every 2-3 weeks</p>	<p>Continue stretches and strengthening from previous phase</p> <p>Continue scapular strengthening</p> <p>Work on strengthening in 90° abduction and overhead when appropriate</p> <p>Can begin jogging if shoulder strength normal and AROM normal</p>	<p>MMT 5/5 at 90° shoulder abduction and scapular plane flexion</p> <p>Achieve 75° of ER</p>