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PT Protocol - Reverse Shoulder Arthroplasty

Precautions

- RTSA specific precautions (first 6-12 weeks):
- NO pushing yourself from chair or bed with the operative arm
- NO Internal Rotation behind the back (reaching for the back pocket or for tucking in the shirt)
- General Precautions (first 6 weeks):
- NO picking up heavy objects or reaching out for objects
- NO Resistive Internal Rotation, NO stretching in abduction and rotation
- NO body blade, weights or upper body ergometer
- NO shoulder extension beyond neutral. “Need to see the elbow at all times”

Phase I: Weeks 0-5

Sling Use:

Patient to remain in sling for 4 weeks. OK to wear the sling in public and crowded places beyond 4 weeks till patient is comfortable

Exercises

- Use of the arm in the sling for daily activities is allowed even though the activity is restricted (typing, scrolling iPAD)
- Supervised Passive ROM [120º for FF/30º for ER at side; ABD max 60-80º without rotation (ELBOW BEND)]
- Scapular exercises (Scapular elevation, depression, protraction and retraction)
- Submaximal isometrics for anterior and middle deltoid, external rotation with arm
- Active range of motion of hand and wrist
- Home exercise program

Phase II (Active Range of Motion phase): Weeks 6-12

Precautions

- Acromion stress fracture: If patient complains of excessive pain posteriorly or laterally over the acromion and is point tender over these locations, please have the patient call back my office immediately
- NO heavy lifting
- Patient has to face the pulley and NO pulleys behind the back
- AVOID sudden jerking motion or grabbing on to objects far out from you

- NO body blade, weights or upper body ergometer

Exercises

- Cleared for daily use of arm for activities of daily living (ADL) but have to abide by RTSA precautions till 12 weeks
- PROM, AAROM and AROM: advance as tolerated
- Use of pulleys, canes for ROM is allowed; Patient has to face the pulley and no pulleys behind the back
- Closed chain scapular exercises
- Light passive stretching at end ranges

Phase III (Strengthening phase): Weeks 12 and beyond

Precautions

- Patient may not have full ROM like a normal shoulder. A typical RTSA patient gets 120-140 degrees of FF; Up to 90 degrees of Abduction, ER of 20-40 degrees, IR to back pocket.
- NO upper body ergometer or body blades
- Lateral raises and side raises with weights should be with the bent elbow and below the shoulder level

Exercises

- Advance ROM to as tolerated with passive stretching at end ranges
- Resisted internal rotation with arm at side allowed
- Internal rotation behind the back and end range stretching in ER stretching allowed
- Advance strengthening of deltoid (all three heads), scapular stabilizers, and posterior rotator cuff

Modalities

- Heat and Ice, Ultrasound, Iontophoresis, Phonophoresis, Therapists' discretion, TENS

Evaluation and others

- Teach home exercise program

Learn More About Your Condition:

Visit Dr. Myerson's website to learn more about your condition:
www.lucasmyersonmd.com