

DuPage Medical Group
Total Shoulder Arthroplasty Protocol

This protocol is a guide for patients who have undergone total shoulder arthroplasty. Each patient is to be advanced individually through the protocol taking into consideration factors such as (but not limited to): age, previous activity level, secondary injuries, and any change in symptoms. ROM goals should be dictated by physician on script. Physician order on a script will always override this protocol guidelines- contact physician immediately if any questions or concerns arise.

Immediately post-op through 6 weeks:

- Places in sling and/or ABD pillow
- Edema/pain control (modalities as indicated/appropriate)
- Active hand/wrist/elbow exercises
- Passive IR to chest wall
- Passive ER-limit should be dictated by physician to protect subscapularis (usually in range of neutral to 30 ER)?
- PROM for forward elevation to 120 degrees
- Pendulum exercises (no weights in hand)

6 weeks post-operatively:

- ER to maximum/full ROM (however we want to be gentle with obtaining ER-no aggressive stretching)
- Active subscapularis exercises
- Goal is to progress towards gaining full ROM, slow with passive ER
- Modalities as indicated/appropriate
- No resistive training yet!
- Initiate light resistive training for RC, deltoid, biceps and distal UE musculature as tolerated

10-12 weeks post-operatively:

- Continue with above PROM/AA/AROM exercises as appropriate
- Initiate light resistive training for scapular stabilizers as tolerated
- Use caution with resistive training of subscapularis!!
- Modalities as indicated/appropriate