



REHABILITATION PROTOCOL:

SHOULDER ARTHROPLASTY
ANATOMIC SHOULDER REPLACEMENT
REVERSE SHOULDER REPLACEMENT (WITH SUBSCAPULARIS REPAIR)

Patient Name: _____

Date: _____

Sling: To be worn for 6 weeks.
0-2 weeks: Remove only for showering. Use disposable sling when showering.
WEAR THE SLING AT ALL OTHER TIMES.
2-6weeks: Remove the sling or remove the neck strap when sitting and sleeping if desired.
Support the weight of the arm on a table, cushion or pillow if out of sling.
WEAR THE SLING AT ALL OTHER TIMES

Information for therapist: Please avoid therapist controlled passive stretching.
Please avoid pendular exercises.
Please avoid pulleys until scapular control is demonstrated with no hitching.
Please take care to avoid tight grip during pulley exercises.
PLEASE CONTACT ME AT ANY TIME TO DISCUSS

0-2 weeks

- Follow the 'Shoulder Rehabilitation 0-2 weeks protocol'

2-6 weeks

- First post-operative visit at two weeks.
- Ice can be discontinued.
- Level 1 exercises – BUT AVOID SHOULDER DUMP
- Level 2 exercises – BUT AVOID ISOMETRIC INTERNAL ROTATION
- Do not force or stretch.

6-12 weeks

- Second post-operative visit at six weeks. **Please complete your online outcomes scores prior to the visit.**
- Please organize your follow up X-Ray prior to the visit.
- Completely discard sling.
- Level 2 Internal Rotation can start now
- Start Level 3 Scapular Positioning, Range of Motion and Early Strengthening exercises

12 weeks – 6 months

- The next post-operative visit is at 12 weeks. **Please complete your online outcomes scores prior to the visit.**
- Please organize your follow up X-Ray prior to the visit.
- Progress to Level 3 Advanced Strengthening exercises.

6 months

- The next post-operative visit is at 6 months. **Please complete your online outcomes scores prior to the visit.**
- Please organize your follow up X-Ray prior to the visit.
- Start Level 4 exercises.

12 months

- The next post-operative visit is at 12 months. **Please complete your online outcomes scores prior to the visit.**
- Please organize your follow up X-Ray prior to the visit.
- Start Level 5 exercises (if patient desires).

Milestones

| | | |
|------------------------------|-----------------|--------|
| Work (light duties / office) | 1-2 | weeks |
| Swimming (breaststroke) | 6-8 | weeks |
| Driving | 6-8 | weeks |
| Work (manual) | 3-6 | months |
| Swimming (freestyle) | 3-4 | months |
| Golf | 3-4 | months |
| Contact Sports | not appropriate | |
| 90% of maximum improvement | 6 | months |
| 100% of maximum improvement | 12-24 | months |

Patient Appointment Notes

2 Weeks

6 Weeks

12 Weeks
