

Phase I (1-2 weeks after surgery)

Precautions: Protection of joint replacement. No shoulder extension beyond neutral. Avoid combination of adduction and internal rotation for the first 3 months. Use of Ultrasling for 6-8 weeks.

Goals: Minimize shoulder pain, decrease inflammation, protect repair. Independent ADL's.

- ☐ Educate patient in home exercise program. AROM of elbow, wrist, and digits. Edema control with massage.
- ☐ May begin light aerobic exercise (bike, walk) while wearing Ultrasling for cardiovascular fitness.

Phase II (3-5 weeks after surgery): Patients seen in therapy 2-3 times per week

Precautions: Protection of joint replacement. No shoulder extension beyond neutral. Avoid combination of adduction and internal rotation for the first 3 months. Use of Ultrasling for 6-8 weeks.

Goals: Minimize shoulder pain, decrease inflammation, protect repair. Progressive range of motion. Independent ADL's

- ☐ AROM elbow wrist and digits. Grip strengthening.
- ☐ Begin supine PROM of shoulder. Flexion/Elevation to 90 degrees, external rotation 20-30 degrees. No internal rotation.
- ☐ Begin submaximal (25-50%) deltoid isometrics and periscapular. Avoid shoulder extension on posterior deltoid activation.
- ☐ Begin pulley exercises for additional PROM in planes of flexion to tolerance and scaption 30 degrees.

Phase III (6-11 weeks after surgery): Patients seen in therapy 2-3 times per week

Precautions: Continue to avoid shoulder hyperextension and IR. No AROM work till 12 weeks post-op. No lifting of objects with operative arm heavier than a coffee cup until week 12.

Goals: Progress PROM (full ROM is not expected). Begin AROM work at 12 weeks to shoulder height only. Control pain and inflammation.

- ☐ Continue above exercises.
- ☐ Discontinue use of Ultrasling at week 8.
- ☐ At 6 weeks – Start IR to tolerance, not to exceed 50 degrees in the scapular plane.
- ☐ At 8 weeks – Submaximal (20-50% effort) isometrics for shoulder musculature in standing or supine. Avoid shoulder hyperextension. AAROM of shoulder motion, not to exceed shoulder height.
- ☐ At 8 weeks – Start scapulothoracic rhythmic stabilization.
- ☐ At 8 weeks – Gentle joint mobilizations for glenohumeral, scapulothoracic

Phase IV (12-15 weeks after surgery): Patients seen in therapy 1-2 times per week

Precautions: No above the shoulder strengthening until 4 months post-op. No pain with AROM exercises starting at 12 weeks. Continue to avoid activities that place the shoulder into hyperextension.

Goals: Good shoulder mechanics. No pain. Maintain ROM. Improve strength and neuromuscular control.

- ☐ Continue above exercises with advancement.

HAWTHORN SURGERY CENTER | RED OAKS SURGICAL SUITES | CONDELL MEDICAL CENTER | RAVINE WAY SURGERY CENTER

- ☐ At 12 weeks – Begin AROM supine below the shoulder flexion and elevation. Light weights may be added as the patient progresses. Sidelying ER/IR, thera-band rows and progress to standing
- ☐ At 12 weeks – Closed-chain ball circles on wall at shoulder height.

Phase V (6 months after surgery and beyond): Patient seen in therapy as needed

- ☐ At 16 weeks – Begin active strengthening above the shoulder
- ☐ At 16 weeks – Progress tubing or pulley resisted flexion, horizontal abduction/adduction, lat pull downs, standing to full AROM above the shoulder.
- ☐ Add UE plyometric exercises with balls.