

## **TOTAL SHOULDER ARTHROPLASTY PROTOCOL**

### **POST-OP WEEK 0-2:**

#### **Home Expectations:**

1. Surgical dressing: Aquacel Dressing for the first 7 days, then remove and leave open to the air until post op appointment.
2. Shoulder immobilizer in place at all times, up to 5 weeks.
3. Begin patient/family instruction for PROM exercises to be performed 2-3 times a day.
4. Pain management:
  - a. Cryotherapy: Apply to surgical site to decrease post op edema and help with pain reduction. Use as often as needed.
  - b. Prescription pain medications as needed.

#### **PHYSICAL THERAPY RESTRICTIONS:**

1. No shoulder external rotation past 20 degrees for 4 weeks.
2. No shoulder abduction past 90 degrees for 4 weeks.
3. Shoulder flexion as tolerated.
4. Caution should be taken with combined external rotation and abduction to avoid anterior dislocation and protect subscapularis attachment site.
5. The patient needs to remain in the immobilizer/sling up to 5 weeks per physician orders.

#### **Therapy Goals:**

1. PROM within the specified restrictions (see above) .
2. AAROM/AROM exercises of the elbow, forearm, wrist, and hand to restore normal ROM of uninvolved joints.
3. Cryotherapy application to decrease pain and swelling, post exercise and as often as needed.

### **POST-OP WEEK 2-4:**

#### **Home Expectations:**

1. Continue to utilize the immobilizer/sling up to 5 weeks per physician orders.
2. Pain management:
  - a. Cryotherapy: Continue to use ice to decrease pain and swelling, post exercise and as often as needed.
  - b. Pain medications. Wean off of prescription pain medications and start Acetaminophen and/or NSAIDS as needed.
3. Follow up with the Orthopedic Team (Physician Assistant) at 2 weeks post op.

#### **Therapy Goals:**

1. Continue PROM as above and gentle external rotation within restrictions.
2. Continue AAROM/AROM for distal upper extremity.

3. Begin supine assisted cane exercises in flexion.
4. Patient may begin pulleys in flexion as tolerated. Limit ER to neutral.

#### **POST-OP WEEKS 4-6:**

##### **Home Expectations:**

1. Continue to utilize the immobilizer/sling up to 5 weeks per physician orders.

##### **Therapy Goals:**

1. Continue PROM. May progress abduction and external Rotation to patients tolerance.
2. Continue with supine cane exercises as needed.
3. Initiate standing active assistive cane exercises.
4. Initiate pain-free submaximal isometrics - Avoiding Internal rotation.

#### **POST-OP WEEKS 6-12:**

##### **Therapy Goals:**

1. Continue PROM to achieve normal ROM compared to non-involved extremity or within Physician's expectations.
2. AROM/PRE's in pain-free ranges using hand weights, tubing, or resistive equipment.
3. Therapy should emphasize AROM required for ADL's, functional activities, and prior level of function within patient/physician expectations.
4. Follow up with your Orthopedic Surgeon at 6 weeks post op.

*This protocol provides you with general guidelines for the rehabilitation of Total Shoulder Arthroplasty. Changes in the program are made as appropriate/indicated for each patient. Any further restrictions on the physician's order take precedence. If you have any questions regarding the patient and/or protocol, please send a message to the Little Falls Orthopedics Team or Physical Therapy Department at (320) 631-2205.*