



Always First™

FOX VALLEY ORTHOPEDICS REVERSE TOTAL SHOULDER ARTHROPLASTY PROTOCOL

NOTE: Patients who underwent reverse TSA secondary to fracture need to progress more slowly- advance them to the next phase based on meeting progression criteria, not on given time frames. If patient also had **proximal biceps tenodesis**, should avoid full elbow extension (to protect biceps repair) for the first few weeks

PHASE 1: IMMEDIATE POST-OPERATIVE (0-4 wks)

*Precautions

- Sling worn as much as possible times 4 wks
- While lying supine, a small pillow/towel roll should be placed behind elbow to avoid shoulder hyperextension/anterior capsule stretch
- Avoid shoulder AROM
- No lifting objects, no excessive motion behind back, no supporting of body weight by hand on involved side
- Avoid ABD/ER or ABD/IR

- PROM flex/ABD in supine to tolerance
- Assisted flex/ABD in scapular plane
- Assisted ER
- Pendulums and Pulleys (flex/ABD) as long as PROM greater than 90
- Restore AROM of elbow (caution if biceps tenodesis)/wrist/hand

MODALITIES

- Ice/cryotherapy, E-Stim

CRITERIA TO PROGRESS TO PHASE II

Tolerates PROM program

90+ degrees PROM flex/ABD

Be able to isometrically activate all shoulder, RC, and upper back muscles

PHASE II: EARLY STRENGTHENING (4-6 wks)

*Precautions

- Sling use for sleeping, and removed gradually over next 2 wks for periods throughout day
- While lying supine, a small pillow/towel roll should be placed behind elbow to avoid shoulder hyperextension/anterior capsule stretch
- No heavy lifting of objects (no heavier than coffee cup)
- No supporting body weight by hands/arms
- No sudden jerking movements

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Week 3:

- Continue PROM (all planes), AAROM (pulley, wand, slide), Isometrics
- Scapular strengthening
- Begin assisted horizontal ADD
- Gentle joint mobs

Week 4:

- Begin Active forward flexion, IR, ER, and ABD
- Progress scap strengthening exercises (protract/retract/depress)
- Begin Isometrics of RC and periscap muscles

MODALITIES

- Ice/E-stim

CRITERIA TO PROGRESS TO PHASE III:

Tolerates P/AAROM, Isometrics

140 degrees PROM flexion

120 degrees PROM ABD

60+ degrees PROM ER scap plane

70 degrees PROM IR scap plane

Be able to actively elevate shoulder vs. gravity to 100 degrees w/ good mechanics

PHASE III: MODERATE STRENGTHENING(6-12 wks)

*Precautions

- No heavy lifting of objects (heavier than 5 lbs)
- No sudden lifting, pushing or jerking activities
- Avoid exercises that put stress on anterior capsule (ex: no combined excessive ER and ABD)

Week 6:

- Increase anti-gravity forward flex/ABD
- Active IR/ER in scapular plane
- Continue to advance PROM to maintain ROM
- Initiate strengthening of deltoid and external rotators w/ isometric exercises against resistance

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Week 8:

- Begin progressive supine active elevation (anterior deltoid strengthening) w/ light weights 1-3 lbs and variable degrees of elevation

Week 10-12:

- Begin resisted flexion, ABD, ER (therabands/cords)
- Continue progressing internal/external strengthening
- **Progress IR behind back** from AAROM to AROM at **12 weeks** (caution stress on anterior capsule)

CRITERIA TO PROGRESS TO PHASE IV:

Tolerates AA/AROM

140 degrees AROM flexion supine

120 degrees AROM ABD supine

60+ degrees AROM ER scap plane

70 degrees AROM IR scap plane

able to actively elevate shoulder vs. gravity to 120+ degrees w/ good mechanics

MODALITIES prn

PHASE IV-ADVANCED STRENGTHENING (12 wks-6 months)

*Precautions

- Avoid exercises that put stress on anterior capsule (ex: no combined excessive ER and ABD)
- Avoid sudden lifting/pushing motions

Week 12+:

- Continue PROM to achieve full ROM
- Strengthening: Resisted IR, ER and Ext with Theraband
- Progress to standing active flexion and scaption with light weight
- Posterior capsule stretching
- GHJ and scapular rhythmic stabilization/manual resistance techniques
- Modalities prn