

Rehabilitation Protocol: Total Shoulder Replacement

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☐ Phase I (0-6 weeks):

- Weight Bearing: Non-weight bearing.
- Bracing: Sling for 6 weeks during day and at night.
 - Can remove for home exercises and bathing.
- Range of motion:
 - Passive ROM ER to 45° to protect subscapularis repair – no forced external rotation.
 - Forward Flexion progress as tolerated.
- No active internal rotation or extension until 6 weeks.
- When lying supine place small pillow or towel under elbow to prevent extension.
- Therapeutic Exercise:
 - Cryotherapy (2 weeks)
 - Pendulum exercises.
 - Hand/wrist/elbow range of motion, grip strengthening.
 - deltoid isometrics.
 - Postural training – scapular retraction, thoracic spine extension
 - Pulley for flexion and abduction once PROM is greater than 90 deg.
 - Table slides, supine passive arm elevation.

☐ Phase II (6-12 weeks):

- Weight Bearing: Non-weight bearing.
- Discontinue Sling.
- Range of motion – Full active and active assisted ROM
- Therapeutic Exercises:
 - Can begin aquatic exercises if prescribed.
 - Begin with supine AROM and progress to standing.
 - Wall walking, table slides, cane exercises.
 - Closed chain scapula.
 - Begin light resisted ER, forward flexion, abduction with therabands once full range of motion achieved and pain level is low.
 - No earlier than 9 weeks.
 - Wait 12 weeks for resisted internal rotation.

□ **Phase III(12-24):**

- Weight Bearing: Begin Weight bearing exercises
- Continue with obtaining active range of motion exercises.
- Continue to protect anterior capsule – no combined ER and abduction above 80° of abduction.
- Begin resisted flexion, abduction, IR and ER in scapular plane.
- Therapeutic Exercises:
 - Advance strength training as tolerated
 - Closed chain scapular rehab and functional rotator cuff strengthening
 - Maximize scapular stabilization