

Rehab Protocol – Total Shoulder Replacement (Anatomical)

Time post op	Rehab	Goals / aims
Day 1 to discharge Inpatient	Gentle pendular exercises Elbow, wrist and hand exercises Instruction for sling, washing/dressing, Sling to be worn when not exercising Passive / assisted flexion in scapular plane in supine External rotation to neutral only. Pain relieving modalities as indicated.	Understands exercises and restrictions To aim to use the arm for activities of daily living within the levels of comfort below 90 degrees
1-2 weeks 1 st Physio Review	Start active assisted exercises in supine– can aim for full passive flexion Progress to exercises in sitting as soon as patient is able Scapular stabilisation exercises – movement pattern correction Isometric rotator cuff <u>except internal rotation</u>	Sling – 3 weeks wean off No forced passive external rotation exercises as reattached subscapularis can be vulnerable Driving – after 6 weeks if comfortable and safe Work – Sedentary – 6 weeks if comfortable
2 - 6 weeks	Encourage full passive flexion Commence active assisted exercises in supine and progress to active within the limits of pain. Check movement pattern Continue isometric rotator cuff and deltoid exercises Proprioception re-education. Emphasise inferior cuff control and endurance 3 weeks - add in external rotation exercise Encourage active movement into all ranges with some gentle self-stretching at the end of range.	50% of preoperative level of active range at week 3



6 weeks plus	<p>Start full active ROM exercises</p> <p>Rotator cuff strengthening through range</p> <p>Progress scapular control if required</p> <p>Continue with deltoid strengthening exercises throughout range</p> <p>Regularly stretch the joint to the end of it's available range</p> <p>Soft tissue manipulation if required</p>	<p>Good scapulohumeral rhythm</p> <p>Passive range of movement at least preoperative level</p>
12 weeks	<p>Aim for regaining good functional range</p> <p>Check ADL activity</p> <p>Refer to Consultant if problems</p>	<p>Functional range</p> <p>Active range at least preoperative range</p>
Complications	<p>Infection,</p> <p>Post operative stiffness and pain</p> <p>Prosthesis dislocation</p>	
Final goals	<p>Complete pain relief with good functional ROM 85-90% of cases</p>	<p><u>Outcome measure</u> – Oxford Shoulder Score.</p>



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