

Total Shoulder Arthroplasty (Anatomic and Reverse)

Physical Therapy Protocol

Keys to a Successful Outcome

- Pain > 4/10 = Hold progression
- Do not push passive ER or active IR too hard, too early in order to protect subscapularis repair
- If latissimus dorsi transfer is performed, delay PROM until 4-6 weeks and AROM until 8 weeks. No IR at all (FF/ER only) until 6 weeks.

Phase	Brace	ROM Goals	WB	Exercises
Weeks 0-6	Worn at all times	PROM as tolerated, limit passive ER to 30°; AAROM can start at 4 wks	NWB	Elbow/wrist/hand, grip strength, pendulums, deltoid isometrics; no active IR or extension until 6 wks
Weeks 6-12	None	AAROM and progress to AROM as tol	PWB (2-3 lbs)	Begin active IR/ext, begin light resisted ER, cont. closed chain scapula, begin resisted IR/ext at 8 wks
Weeks 12-16	None	Gradual return to FAROM	PWB	Advance strength training, focus ant. Deltoid and teres, aggressive scapular stabilization
Months 4-6	None	FAROM	PWB	Gradually progress strengthening, return to light recreational hobbies (gardening, light sport activities)
Months 6-12	None	FAROM	WBAT	Return to full ADLs, no heavy lifting, avoid activities that force ant capsule (AB/ER)

General Time Frames for ADLs

- Lower body, core, walking, and gentle stationary bike okay immediately if in sling
- Driving: 2-8 wks
- Desk/light return to work: 6-12 wks
- Treadmill or Light Jogging: 3 months
- Golf: putting (8-10 wks), chipping (14-16 wks), irons (20-22 weeks), full (6-8 mo)
- Lifetime restrictions: No push-ups, no heavy overhead work, avoid contact sports