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TOTAL SHOULDER AND HEMIARTHROPLASTY - Rehabilitation Protocol

Rehab Progression Summary:

0-2 weeks	Passive ROM
2-4 weeks	Passive ROM gradually progress to AAROM as indicated by patient progress*
6-12 weeks	AROM to gentle strength progression
12+ weeks	Strength progression / pre-sport activities
* If a biceps tenodesis was done with the TSA, no active bicep contraction for 6 weeks	

Immobilization

Sling will be placed in operating room. Use sling at all times for 4 weeks (use in public for 6 weeks). Wean from sling weeks 4-5.

Immediate post-op period (Week 0-2)

ROM Guidelines: Limit ER to 20 degrees. Forward flexion as tolerated.

Treatment Strategies:

- Passive ROM stretching activities:
 - o Forward elevation with complete assistance of non-operative hand.
 - o Pendulum swings
 - o Pulley
 - PROM by therapist
- Submaximal isometrics (ER, abd, ext only)
- Active elbow, wrist, hand exercises
- Scapulothoracic range of motion

Early post-op period (Week 2-4)

ROM Guidelines: Limit ER to 30 degrees, forward flexion as tolerated.

Treatment Strategies:

- Continue PROM and above exercises.
- Begin AAROM exercises (within ROM guidelines)
 - o May begin AAROM horizontal adduction and abduction exercise.
- Remove sling for bathing and exercise only.

Week 4-6

ROM Guidelines: Limit ER to 45 degrees. All other motions as tolerated.

Treatment Strategies:

- Continue with PROM, AAROM exercise as needed for ROM.
- Add isometric flexion and IR

Week 6-12

ROM Guidelines: Gradually increase external rotation to maximum achieved in OR.

Treatment Strategies:

- Progress to AROM in all ranges as determined safe by therapist.
- Gradually progress to gentle strengthening exercises. IR/ER against resistance is permitted.

3-6 Months

- Advance strengthening exercise as tolerated.
- Return to light sports activities as tolerated. (golf, tennis)