

# REHABILITATION PROTOCOL: REVERSE TOTAL SHOULDER ARTHROPLASTY

# **DR. KEVIN SHEPET**

#### **General Information:**

- Time required for full recovery is 6-12 months
- Deltoid function is critical for function of this implant.

#### **Precautions:**

- In this procedure, the subscapularis is detached for exposure of the glenohumeral joint and then reattached after surgery is complete. This reattachment must be protected for 6 weeks. During this time, strengthening activities involving internal and external rotation must be avoided.
- Dislocations of the Implant and infections are the two highest reported complications.
- MOTIONS TO AVOID: Abduction with External Rotation and Abduction with Internal Rotation

# **Immobilization:**

- Sling should be worn for the first 48-72 hours
- After 3 days, sling can be removed for light activity with the patient awake as long as the hand remains in front of the body (i.e. desk work, knitting, tying flies for fishing, etc)
- Sling should be worn as needed during the day, whenever the patient is active or in an unprotected environment; it should always be worn at night for the first 6 weeks
- Discontinue sling completely at 4 weeks

# After Surgery to 2 Weeks Post-Op

- 1. Wound Inspection
  - If wound is sealed, it is okay to shower but not soak
- 2. Patient Education
  - No active shoulder motion for 4 weeks, all planes
  - No active internal for 6 weeks
  - Sling use as directed by physician
  - Icing 3 times/day for 20 minutes
- 3. Exercise
  - Pendulum exercise without weight
    - Clockwise / Counterclockwise
    - Side-to-side / Front-to-back
    - Flexion
    - Abduction
    - External rotation to neutral only
  - Isometric exercises
    - Flexion / extension
    - Abduction
    - External rotation
  - Progressive resistive exercises
    - Shoulder shrugs
    - Bicep curls
    - Triceps / shoulder extension
    - Scapular retraction prone
    - Wrist supination / pronation
    - Wrist flexion / extension
    - Gripping exercises
- 4. Modalities PRN
- 5. Ice

# 2 Weeks Post Op

- 1. Exercise
  - Pendulum exercise with light weight
  - Isometrics as previous
  - Progressive resistive exercise as previous
- 2. Modalities PRN
- 3. Ice

# 4 Weeks Post-Op

- 1. Scar Mobility
- 2. Exercise
  - AROM
    - All planes except IR or ER in Abduciton. Focus on IR and ER with arm at side **limit to** 20° (Increase 20° per week)
  - AAROM

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- Provide with Home Pulley System
- Progressive resistive exercise continue as prevous
- 3. Modalities PRN
- 4. Ice
- 5. Can discontinue sling as tolerated

#### 6 Weeks Post-Op

- 1. Discontinue sling use
- 2. Exercise
  - AROM
    - All planes except IR or ER in Abduction. Focus on IR and ER with arm at side– **limit ER** to 45°
    - UBE, forward / reverse and standing off to the side clockwise / counterclockwise
  - Progressive resistive exercise continue as previous, adding:
    - Shoulder internal / external rotation with low resistance Theraband (limit ER to 45°)
    - Wall push-ups plus, hand in neutral position
    - Advance Deltoid strengthening
- 3. Modalities PRN
- 4. Ice

# 8 Weeks Post-Op

- 1. Full PROM, ER to  $60^{\circ}$
- 2. Exercise
  - Progressive resistive exercise continue as previous, adding:
    - Low resistance / high repetition:
    - Flexion, abduction, supraspinatus (limit to 70°), prone fly, scapular retraction, prone extension
  - Body Blade
    - One-handed grip, abduction to 90°
    - Two-handed grip, flexion to 90°
- 3. Modalities PRN
- 4. Ice

# 10 Weeks Post-Op

- 1. Full AROM, no limits, avoid abduction IR and abduction ER
- 2. Exercise
  - Progressive resistive exercise continue as previous, focus on deltoid external rotation and internal rotation
- 3. Modalities PRN
- 4. Ice
- 5. Progress to full activities