



Total Shoulder Arthroplasty or Resurfacing (anatomic) Salvatore Frangiamore MD

\*\* Please keep in mind, these are guidelines only. Other than specifics regarding slingwear and specific limitations, I trust your expertise to provide the best treatment strategy for my patients\*\* if there are any questions don't hesitate to contact me.

# Phase 1: Immediate Post-Surgical Phase (0-4 weeks) GOALS:

- Allow healing of soft tissue and maintain integrity of replaced joint
- Gradually increase shoulder PROM and increase AROM of elbow, wrist and hand
- Reduction of pain, inflammation, and muscular inhibition

• Independence with ADLs with modifications not to disrupt integrity of replaced joint **PRECAUTIONS:** 

- Proper sling use for 4 weeks even while sleeping
- PROM should be gradual and never forced (avoid pain or pinching)
- Limit use of involved UE: Avoid shoulder AROM and avoid lifting objects
- Towel roll placed underneath arm to avoid humeral extension for ROM & sleeping
- Do NOT bear weight through involved extremity
- No driving for 6 weeks

## Phase 2: Early Strengthening Phase (4-6 weeks)

#### GOALS:

- Restore PROM and gradually progress AROM
- Control pain and inflammation
- Allow continual healing of soft tissue and avoid overstress
- Reestablish dynamic glenohumeral stability

#### **PRECAUTIONS:**

\*\*If glenoid bone loss and posterior instability a concern AVOID shoulder IR

- Avoid sudden jerky movements and avoid heavy lifting (no heavier than coffee cup)
- Proper sling use for 6 weeks even while sleeping
- PROM should be gradual and never forced (avoid pain or pinching)
- Towel roll placed underneath arm to avoid humeral extension for ROM & sleeping
- Do NOT bear weight through involved extremity
- No driving for 6 weeks

# Phase 3: Moderate Strengthening Phase (6-12 weeks) GOALS:

• Gradual restoration of shoulder strength, power, and endurance





- Progressive return to functional activities with involved UE
- Optimize neuromuscular control

### PRECAUTIONS:

\*\*If glenoid bone loss and posterior instability a concern AVOID shoulder IR

- No heavy lifting of objects (no heavier than coffee cup)
- No quick or sudden movements
- Avoid sudden lifting or pushing activities
- Do NOT bear weight through involved extremity
- Towel roll placed underneath arm to avoid humeral extension for ROM & sleeping

### CRITERIA TO DISCHARGE FROM SKILLED THERAPY

- 1. Patient maintains nonpainful AROM with proper scapulohumeral rhythm
- 2. Maximized functional use of upper extremity
- 3. Maximized muscular strength and endurance
- 4. Patient has returned to daily functional activities