

## **TOTAL SHOULDER ARTHROPLASTY** **TWIN CITIES ORTHOPEDICS**

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### **WEEKS 0-3**

- Sling should be worn at rest.
- Sling should be used for sleeping. Use a small towel or pillow to prop the elbow to avoid hyperextension/anterior capsule/subscapularis stretch when lying supine.
- Avoid AROM.
- No lifting objects on involved side.
- No arm extension.
- No supporting of body weight by hand on involved side.
- Passive ROM forward flexion in supine 130 degrees flexion, 60 degrees abduction and 30 external rotation.
- Pendulums
- Pulley for flexion only.
- Subscapularis precaution: no active IR in any position.
- Easy isometric exercises, abduction, flexion, extension (no easy isometrics with rotator cuff repair).
- Scapular stabilization exercises.
- Active distal extremity exercise (elbow, wrist, hand)

### **WEEKS 4-6**

- Sling at rest
- Continue PROM and isometrics.
- Continue protection of external rotation to 30 degrees.
- Progress to ER isometrics
- Progress to AAROM in supine. No AAROM for internal rotation.
- Progress forward flexion to full passively within patients tolerance.
- Progress scapular stabilization avoiding extension past neutral.

### **WEEKS 7-10**

- wean from sling
- Progress to full AROM/AAROM/PROM in all planes.
- Begin active internal rotation.
- NO SUBSCAPULARIS STRENGTHENING UNTIL 12 WEEKS POST –OP.
- AROM with increasing repetitions in gravity assisted positioning. Progressing to antigravity position as movement quality dictates.
- Isotonic strengthening with very light weight <1/2 lb and increasing as tolerated at week 10.
- If combined with rotator cuff repair PRE's would not begin until week 10 in any plane.

### **WEEKS 11-16**

- Progress internal rotation behind back.
- Subscapularis strengthening at week 12.
- Continue full stretching and strengthening program to patient's tolerance.

### **WEEKS 20-28**

- Return to full functional activities including light recreational sports depending on patients strength.

Avoidance of high impact activities such as hammering, contact sport, free weight training is recommended.

This protocol provides the rehabilitation specialist with general guidelines for the rehabilitation of the patient undergoing total shoulder arthroplast.

Questions regarding the progress of any patient are encouraged and should be directed to 952 442-8201 or [rehabprotocols@tcomn.com](mailto:rehabprotocols@tcomn.com) .