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Reverse Total Shoulder Arthroplasty Rehabilitation Protocol

Physical therapy after a reverse total shoulder arthroplasty (R-TSA) should begin within the first week following surgery. Physical therapy should be 2-3 time per week through 12 weeks post-operatively.

Phase 1: (post-operative-2 weeks)

Goals	 Minimize pain Minimize swelling Begin passive range of motion exercises Educate patient on home exercise program for days not in PT
Precautions/ Sling Use	Must wear sling (all components) at all times, except during home exercises and physical therapy
Range of Motion	 Pendulum exercises (3x/day) Passive supine forward flexion (limit to 130°) Passive supine external rotation (limit to 30°) Passive internal rotation (limit to belly) Assisted elbow flexion and extension
Strengthening	 Peri-scapular strengthening exercises Deltoid isometrics Wrist and hand exercises
Home Instructions	 Keep surgical dressings clean and dry Change surgical bandages on the 7th day after surgery (keep covered until first clinic visit) Can bathe on the 5th day after surgery (do not scrub, soak, or submerge the incisions) Must sleep in the sling May type or write with surgical side hand, but only while in the sling

Phase 2: (2 weeks-6 weeks)

Goals	Minimize painContinue to improve PROMBegin AAROM
Precautions/ Sling Use	Continue to wear sling (all components) at all times until week 4, except during home exercises and physical therapy.

Range of Motion	 Passive range of motion Forward Flexion advance to full ROM External Rotation to 60°, advance as tolerated Abduction to 120°, advance as tolerated Active assisted forward flexion using pulleys or cane to 90° Elbow extension and flexion No cross-body or internal rotation motion at this phase
Strengthening	 Peri-scapular strengthening exercises Shoulder sub-maximal (pain free) isometrics Wrist and hand exercises with light resistance if appropriate
Home Instructions	 Continue to sleep in sling Can submerge incision in water after first post-op visit only when incision is completely healed Can continue to write or type with operative hand while in sling No lifting with operative shoulder Do not support bodyweight with operative shoulder

Phase 3: (6-12 weeks)

Goals	 Advance PROM in all planes Begin AROM Begin light shoulder resistance exercises
Precautions/ Sling Use	Discontinue sling use at 4-6 weeks
Range of Motion	 Progress PROM as tolerated from supine to vertical position Being internal rotation and cross-body motion Begin AROM exercises in all directions (flexion, extension, external rotation and internal rotation), progress as tolerated limiting excessive IR
Strengthening	 Continue isometric contractions in all directions Begin light resistive exercises (bicep curls, tricep extemsions) Theraband exercises to increase forward flexion, extension, and external rotation strength (limit IR strengthening at this point)
Home Instructions	 No longer need to wear the sling No lifting pulling or pushing greater than 2 pounds No overhead work No repetitive motions with the shoulder

Phase 4: (12+ weeks)

Goals	 Advance end range PROM and AROM (goal AROM FE120, Abd 120, Ext Rot 45 Restore normal scapulothorasic rhythm/motion Advance muscular strength Transition therapy to a home exercise program
Precautions/ Sling Use	No sling useProceed with strengthening gradually

Range of Motion	 Progress to full PROM and AROM as tolerated Teach patient flexibility exercises to continue at home to encourage full ROM
Strengthening	 Increase resistive exercises external rotation at 45 and 90 degrees Slow progress to power
Home Instructions	 Work on restoring normal activities of daily living Discuss specific activity/sport restrictions with your surgeon

For any questions about operative details or rehabilitation guidelines, please contact the respective surgeon's Athletic Trainer at the contact information found at this link: https://med.virginia.edu/orthopaedic-surgery/orthopaedic-divisions/sports-medicine/protocols/