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<u>Rehabilitation Protocol</u> <u>Reverse Shoulder Arthroplasty for Fracture</u>

Phase I: Protect the Tuberosity (Rotator Cuff) Repair (0 to 6 weeks)

- Dressing to remain in place until seen in clinic. If dressing becomes saturated, ok to change after cleaning with alcohol pad (gently)
- Sutures under the skin, do not need to be removed.
- Bruising in the anterior arm, chest wall, and forearm are EXPECTED and should be monitored clinically
- Sling/immobilizer should be worn AT ALL TIMES other than when showering
- Initiate exercise program 3 times per day immediately:

Immediate elbow, forearm and hand AROM

• Pendulums may begin at 2 weeks after instruction by therapist

Phase II: PROM/AAROM (6 to 8 weeks)

- Discontinue sling at all times
- Lifting restriction of 2-3 pounds
- Advance AAROM and PROM as tolerated Maintain ER limit of 30 until 8 weeks. Advance forward elevation as tolerated
- Scapular stabilizer strengthening.

Phase III: AROM/Strengthening (>8 weeks)

- Advance AROM as tolerated
- Strengthen rotator cuff and shoulder musculature (Isometrics, Theraband, dumbbell, etc). AVOID RESISTED IR OR EXTENSION UNTIL 10 WEEKS.
- Lifting restriction of 10 pounds until 3 months
- Incorporate low level functional activities at 3 months (swimming, water aerobics, light tennis, jogging)
- Start higher level activities at 4 months (tennis, light weight training, and golf).
- Initiate functional progression to sports specific activities at 4 months.