



**UNIVERSITY ORTHOPAEDIC CENTER, P.A.**  
**Post-Op Total Shoulder Replacement**  
**Dr Longobardi**

<u>TIME LINE</u>	<u>CLINICAL INTERVENTION</u>	<u>GOALS / PRECAUTIONS</u>
<p><b>0-2 Weeks</b></p>	<p><b>Home Exercise Program (HEP):</b></p> <ul style="list-style-type: none"> <li>• Safely simulate clinical program</li> <li>• Instruct in proper use of heat / ice</li> </ul> <p><b>Ther Ex:</b></p> <ul style="list-style-type: none"> <li>• AAROM (avoid UBE)</li> <li>• Elbow, wrist, hand ROM</li> <li>• Codman's</li> <li>• Pulley: assisted flexion</li> <li>• Wand: assisted ER to neutral</li> <li>• Scapular elevation and retraction</li> </ul> <p><b>Manual Techniques:</b></p> <ul style="list-style-type: none"> <li>• Single plane gentle PROM               <ol style="list-style-type: none"> <li>1. avoid combined abduction/ ER</li> <li>2. avoid active and resistive IR for first 4 weeks</li> </ol> </li> </ul>	<p><b>Frequency:</b></p> <ul style="list-style-type: none"> <li>• 2-3x/week</li> </ul> <p><b>ROM:</b></p> <ul style="list-style-type: none"> <li>• Avoid combined abduction w/ ER</li> <li>• Avoid UBE at all times</li> </ul>
<p><b>2-4 Weeks</b></p>	<p><b>HEP:</b></p> <ul style="list-style-type: none"> <li>• Safe progression of HEP in conjunction w/ clinical program</li> </ul> <p><b>Ther Ex:</b></p> <ul style="list-style-type: none"> <li>• AAROM               <ol style="list-style-type: none"> <li>1. towel: assisted IR</li> <li>2. wall climb to full flexion</li> <li>3. doorway: assisted ER</li> </ol> </li> <li>• Scapular elevation and retraction</li> <li>• PROM to tolerance</li> </ul> <p><b>See Pg 2 for continued care</b></p>	<p><b>Frequency:</b></p> <ul style="list-style-type: none"> <li>• 2-3x/week</li> </ul> <p><b>ROM:</b></p> <ul style="list-style-type: none"> <li>• Emphasize TX on ROM</li> </ul>



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4-6 Weeks	<p><b>HEP:</b></p> <ul style="list-style-type: none"> <li>• Safe progression of HEP</li> </ul> <p><b>Ther Ex:</b></p> <ul style="list-style-type: none"> <li>• PROM               <ol style="list-style-type: none"> <li>1. more aggressive PROM</li> <li>2. OK to begin abduction w/ ER</li> <li>3. begin progressive resistive IR</li> </ol> </li>   <li>• AROM all planes</li> <li>• Progress hand, elbow, wrist strengthening</li> <li>• Doorway self stretch Abduction w/ ER</li> <li>• Initiate Isometric strengthening</li> <li>• Initiate aquatics if available</li> </ul>	<p>Frequency:</p> <ul style="list-style-type: none"> <li>• 2-3x/week</li> </ul>
6-8 Weeks	<p><b>HEP:</b></p> <ul style="list-style-type: none"> <li>• Safe progression as tolerated</li> </ul> <p><b>Ther Ex:</b></p> <ul style="list-style-type: none"> <li>• A/PROM achieve full ROM in all planes               <ol style="list-style-type: none"> <li>1. initiate AROM gravity eliminated</li> <li>2. progress to anti-gravity</li> <li>3. add light resistance as tolerated</li> </ol> </li> <li>• Progress hand, wrist, elbow strengthening</li> <li>• Progress isometrics as tolerated</li> <li>• Continue/progress aquatics if available</li> </ul>	<p>Frequency:</p> <ul style="list-style-type: none"> <li>• 2-3x/week</li> </ul> <p>See page 3 for continued care...</p>



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8-12 Weeks	<p><b>HEP:</b></p> <ul style="list-style-type: none"> <li>• Safe progression to include more intensive PRE's</li> </ul> <p><b>Ther Ex:</b></p> <ul style="list-style-type: none"> <li>• PRE's: progress resistance</li> <li>• Initiate T-Band exercises</li> <li>• If pain free and full ROM: begin isotonic machines</li> <li>• Progress functional training</li> </ul>	<p><b>Frequency:</b></p> <ul style="list-style-type: none"> <li>• 2x/week</li> </ul>
12-16 Weeks	<p><b>Ther Ex:</b></p> <ul style="list-style-type: none"> <li>• Progress functional / recreational training</li> <li>• Prepare patient for DC w/ advanced HEP</li> <li>• Progress to full strengthening program as tolerated</li> </ul>	<p><b>Frequency:</b></p> <ul style="list-style-type: none"> <li>• 1-2x/week</li> </ul>

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