

Accelerated Reverse Total Shoulder Arthroplasty Physical Therapy Protocol



Dr. William Mook

	Phase I: Maximal Protection/Passive Range of Motion (PROM)	1	2	3	4	5	6	7	8	9	10	13	17	21	25
	Date														
Sling x 2 Weeks FE: 120° Weeks 2-6 ER: 30° Weeks 2-6 IR: to belly ABD: 90° Weeks 2-6	Scapular Retraction-Depression	●	●	●	●	●	●								
	Cervical ROM Exercises	●	●	●	●	●	●								
	Elbow, Hand and Wrist ROM	●	●	●	●	●	●								
	Pendulums			●	●	●	●								
	Aqua Therapy for Gentle AAROM			●	●	●	●								
Begin AROM 2 weeks	Ankle Pumps to prevent DVT's	●	●	●	●	●	●								
	Passive ROM														
	External Rotation				30°			●	●						
	Forward Elevation and Scaption				120°			●	●						
Sling 2 weeks	Abduction				90°			●	●						
	Internal Rotation to Belt Line				●	●	●	●							
	Internal Rotation				●	●	●	●							
Time Lines Week 1 (POD 1-7) Week 2 (POD 8-14) Week 3 (POD 15-21) Week 4 (POD 22-28) Precautions Avoid combined motions of extension, adduction, and internal rotation (i.e., reaching behind back) for 12 weeks	Phase II: Minimal Protection/Active Range of Motion (AROM)	1	2	3	4	5	6	7	8	9	10	13	17	21	25
	Active Assist ROM														
	Internal and External Rotation			●	●	●									
	Forward Elevation and Scaption			●	●	●									
	Isometrics - Light														
	Deltoid			●	●	●	●	●	●						
	Biceps and Triceps			●	●	●	●	●	●						
	Active ROM														
	Slideboard Abduction			●	●	●	●	●	●						
	Standing Abduction to 45°			●	●	●	●	●	●						
	Sidelying Abduction				●	●	●	●	●						
	Standing Abduction to 90°					●	●	●	●						
	Prone Horizontal Abduction with ER				●	●	●	●	●						
	Prone Lower Traps to 60°			●	●	●	●	●	●						
	Prone Extensions with ER			●	●	●	●	●	●						
	Low Load Prolonged Stretches														
	Door Jam Series							●	●	●	●	●	●	●	●
	Towel Internal Rotation											●	●	●	●
	Cross Arm Stretch						●	●	●	●	●	●	●	●	●
	Sleeper Stretch							●	●	●	●	●	●	●	●
	TV Watching Stretch											●	●	●	●
	90/90 External Rotation Stretch													●	●

If you have any problems or questions,
 please call your doctor's office (8am-5pm).
 Answering service for after hours.

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Activities of Daily Living (ADL's)		1	2	3	4	5	6	7	8	9	10	13	17	21	25
Eating and Drinking (elbow motion ok)							●								
Dressing							●								
Washing and Showering							●								
Computer with supported arm		●	●	●	●	●									
Driving		●	●	●	●	●	●	●	●						
Lifting up to 5 lbs.			●	●	●	●	●	●	●						
Overhead Activity							●	●	●	●	●	●	●	●	●
Lifting greater than 5 lbs.							●	●	●	●	●	●	●	●	●
Phase III: Initial Resistance Strengthening and Proprioception		1	2	3	4	5	6	7	8	9	10	13	17	21	25
External Rotation						●	●	●	●	●	●	●	●	●	●
Internal Rotation						●	●	●	●	●	●	●	●	●	●
Punches with a plus						●	●	●	●	●	●	●	●	●	●
Sport Cord Rows						●	●	●	●	●	●	●	●	●	●
Abduction with weight						●	●	●	●	●	●	●	●	●	●
Lower Traps						●	●	●	●	●	●				
Bicep Curls							●	●	●	●	●	●	●	●	●
Tricep Extensions						●	●	●	●	●	●	●	●	●	●
Phase IV: Advanced Resistance Strengthening and Proprioception		1	2	3	4	5	6	7	8	9	10	13	17	21	25
External Rotation at 45°							●	●	●	●	●	●	●	●	●
External Rotation at 90°												●	●	●	●
Bear Hugs							●	●	●	●	●	●	●	●	●
Supraspinatus Exercise							●	●	●	●	●	●	●	●	●
Advanced Pushup Plus															
Advanced Closed Chain Stability															
PNF with Resistance												●	●	●	●
Decelerations															
Plyometric External Rotation															
Phase V: Weight Lifting in Gym and Return to Sports		1	2	3	4	5	6	7	8	9	10	13	17	21	25
CRITERIA: FULL PAINFREE MOTION AND FULL ROTATOR CUFF STRENGTH RESTORED. NO LAT PULLS BEHIND BACK OR WIDE GRIP BENCH PRESS.															
Throwing Progression														●	●
Skiing												●	●	●	●
Overhead and serving sports (tennis, volleyball)													●	●	●
Contact sports (football, hockey and lacrosse)															
Swimming													●	●	●
The intent of this protocol is to provide guidelines for progression of rehab. It is by no means intended to serve as a substitute for clinical decision making. Progression through each phase of rehab is based on clinical criteria and time frames as appropriate. It is important that each phase of rehab is mastered prior to initiating the next phase to ensure proper healing of repaired tissues. © Copyright 2012 Dr. Peter Millett/Howard Head Sports Medicine															
*Dr. Mook would like to thank Dr. Millett, The Steadman Clinic, Dirk Kokmeyer, and the staff at Howard Head Sports Medicine in Vail, Colorado for the creation of these rehabilitation recommendations. They have been updated and modified to suit the needs of Dr. Mook's patients.															