



**Reverse Total Shoulder Replacement
Post-op Therapy Protocol**

Date of surgery: _____

Surgeon: _____

Lat transfer? ____Y ____N

Subscapularis repair? ____Y ____N

Precautions: Non weightbearing and in the sling at all times including sleeping, except showering/bathing for 6 wks

Sling use: 6 wks

Next Follow up: _____

Reverse Total Shoulder Replacement

	Intervention	Milestones
0-6 wks	One PT visit with review of precautions, sling use, instruct in posture ex and elbow wrist and hand ROM	Full AROM elbow wrist hand Good pain control Compliance with sling use
6-8wks	Begin gentle PROM into extension, flexion, scaption, ER and IR to belly Begin light elbow/wrist/hand PRE's Begin submax isometrics Progress low level scapular ex avoiding excessive shoulder extension Lifting restriction to the weight of coffee cup Begin AAROM in supine flexion and scaption	Painfree ADL's below shoulder height PROM -flex between 90-125 -ER 20-30 degrees
8-10 wks	Begin AAROM in standing flexion and scaption	AAROM flex 90-125 in standing
10-12wks	Begin AROM flexion and scaption Begin AAROM abd Begin gentle isotonic ER IR Begin proprioception ex	AROM 90-125 flexion and scaption with acceptable mechanics
12-14 wks	Begin closed chain ex in controlled planes of motion Progress scapular ex Up to 3 pounds lifting on operated side Begin AROM abduction	AROM 90-125 with acceptable mechanics At 14 wks progress to HEP focused on continued strength gains and return to function

Expectations:

- Between 90-125 degrees of overhead motion with acceptable mechanics
- Significant reduction in pain compared to pre-operative state
- Functional ER to 20-30 degrees
- 10-15 pound lifting limit indefinitely for bilateral tasks

Avoidance of sudden lifting, pushing, pulling tasks are limited indefinitely