

Reverse Total Shoulder Arthroplasty for Fracture

Physical Therapy Protocol

Phase I – Protect the Tuberosity (Rotator Cuff) Repair (0 to 6 Weeks)

Goals:

- Protect surgical site and repair
- Maintain hand, wrist, and elbow mobility
- Initiate gentle shoulder mobility under supervision

Precautions / Restrictions:

- Sling or immobilizer to be worn at all times except when showering
- Staples to be removed at 14 days post-op
- No shoulder AROM or lifting
- No resisted internal rotation or extension

Therapeutic Exercises:

- Begin immediately post-op, 3x/day:
 - Elbow, wrist, and hand AROM

- Pendulum exercises (start at 2 weeks post-op with therapist instruction)

Phase II – Passive and Active-Assisted ROM (6 to 8 Weeks)

Goals:

- Restore early PROM and AAROM
- Improve scapular mobility and control

Precautions / Restrictions:

- Discontinue sling at 6 weeks
- No lifting >2–3 lbs
- Maintain external rotation limit of 30° until 8 weeks post-op

Therapeutic Exercises:

- Progress PROM and AAROM within safe limits
- Advance forward elevation as tolerated
- Scapular stabilizer strengthening

Phase III – AROM and Strengthening (>8 Weeks)

Goals:

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- Restore full AROM
- Build shoulder and rotator cuff strength
- Reintroduce functional activity

Precautions / Restrictions:

- No resisted internal rotation or extension until after 10 weeks
- Limit lifting to <10 lbs until 3 months post-op

Therapeutic Exercises:

- Progress AROM exercises
- Begin strengthening with:
 - Isometrics
 - Theraband
 - Light dumbbells
- Introduce low-level functional activities at 3 months:
 - Swimming
 - Water aerobics
 - Light tennis
 - Jogging

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- Initiate higher-level activities at 4 months:
 - Tennis
 - Light weight training
 - Golf
- Begin sport-specific drills at 4 months

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