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## **REVERSE TOTAL SHOULDER REPLACEMENT POST-OPERATIVE REHABILITATION PROGRAM**

(Tissue Deficient Group)

### **Phase One – Protection Phase (Week 0-8)**

**Goal: Protect integrity of replacement  
Decrease shoulder pain**

No formal rehab for 8 weeks to protect the integrity of the replacement/ facilitate soft tissue healing

Sling is optional unless a fracture was the purpose for surgery

No MRE, No Lifting

Pt may be seen on an intermittent basis to minimize the risk of frozen shoulder via PROM  
Ice and pain meds for pain control

### **Phase Two – Active Motion Phase (Week 8-12)**

**Goals: Improve shoulder strength (deltoid and any intact RC musculature)**

**Improve Range of Motion  
Decrease pain/inflammation  
Increase Functional Activities**

Exercises:

- Submax Isometrics
- PROM in all planes as tolerated
- May initiate gentle joint mobilizations if needed
- AAROM as tolerated
  - Flexion
  - Abduction
  - ER / IR
- AROM Exercises
  - Seated Flexion (45°-90°)
  - Supine Flexion (Full available range)
- Initiate T-band exercises for ER
- Initiate biceps/triceps strengthening
- Initiate scapular stabilization

### **Phase Three – Strengthening Phase (Week 12-24)**

**Goals: Improve strength of shoulder musculature**

**Improve and gradually increase functional activities**

Exercises:

- Continue T-band strengthening for IR/ER throughout the scapular plane
- May initiate heavier resistive strengthening for flexion, abduction, extension per patient tolerance
- May initiate PNF strengthening per patient tolerance
- Continue scapular/core stabilization
- Continue PROM stretching
- Continue gentle joint mobilization if needed

### **Phase Four – Return of Function Phase (Week 24+)**

**Goals: Improve functional strength**

**Return to functional activities**

Patient should be on an independent home exercise programmed designed and customized by the PT for specified functional strengthening.