



317-208-3866

Badman Reverse Total Shoulder Replacement Protocol (With Subscapularis Repair)

PHASE I (0-3 weeks post-op)

Precautions

- Immobilizer on at all times, except during exercise and while showering
- **NO shoulder ROM except pendulums if instructed by Dr. Badman once wound is healed**

Treatment

- **Position:** Supine with upper extremity slightly abducted. Place a small pillow or towel under distal humerus
- Active circumduction performed pendulum position. Circles not larger than a basketball.
- **AROM:** hand, wrist, forearm, and elbow; when performing elbow flexion keep fingertips in contact with body
- **Pain management:** instruction in use of ice and positioning
- **Pendulum** position for hygiene
- **Instruction/Education:** bathing, dressing, donning and doffing immobilizer and precautions. Edema reduction techniques.

3-Week Goals:

- Independent emergency evacuation (enter and exit residence).
- Independent HEP
- Independent sit-stand
- Independent bed transfers
- Minimal assistance donning and doffing immobilizer
- Minimal assistance bathing
- Minimal assistance dressing
- Demonstrate knowledge of precautions
- Pain Management 0-4/10

*Exercises performed 2-3 times per day at 10-15 reps each session.

PHASE II (4-6 weeks post-op)

Precautions

- Discontinue Immobilizer; continue wearing sling, except during exercise and while showering.



317-208-3866

Treatment

- **Position:** supine with upper extremity slightly abducted, place a small pillow or towel under the distal humerus.
- Add: **PROM in supine**
 - Gentle ER not to exceed 20 degrees
 - Gentle scaption not to exceed 120 degrees
- Instruction to caregiver if willing and able
- Closed chain use of UE for sit-stand

Continue:

- **AROM:** continue phase I PRN
- **Education and ADL's:** continue phase I PRN
- **Transfer/Gait training:** continue phase I PRN
- **Pain Management:** continue phase I PRN

Phase II Goals

- Independent car transfer
- Independent shower transfer
- Independent modified bathing
- Independent modified dressing
- Independent HEP without caregiver
- Pain management 0-2/10
- AAROM not to exceed 0-120 degree elevation 20 degree ER
- Make recommendations re: OP PT at 6-7 weeks

*Exercises to be performed 1-3 times per day at 10-15 reps each session

PHASE III (7-9 weeks post-op)

Treatment

- **AROM and AAROM:** continue as above
- **AROM:** initiate AROM exercises in supine increasing elevation gradually within patient's tolerance
 - **ER** not to exceed 35 degrees
 - **Scaption** not to exceed 135 degrees
 - D1 and D2 patterns, triceps, serratus in supine, extension



317-208-3866

○ Sidelying ER

- **Resisted ROM:** initiate gentle isometrics. IR, ER, flexion, extension
- **Closed Chair:** progression from phase II continued, add resistance and challenge

Phase III Goals

- Independent home exercise program
- AAROM in supine not to exceed 0-135 degrees elevation, 0-35 degrees ER
- ROM exercises performed 2-3 times per day until maximum ROM achieved, then performed daily for 3 months, then performed 3 times per week.

PHASE IV (10-12 weeks post op)

Treatment

- **AROM:** continue phase I, II, III PRN. Begin AROM performed in standing: elevation/scaption and diagonal patterns
- **AAROM:** continue as above. Increase ROM as tolerated by patient
- **Resisted ROM:** initiate gentle strengthening with theraband/tubing in small arcs of motion: IR, ER, elevation, abduction, extension to 30 degrees.
- **ADL's:** military press in diagonal patterns, grooming, dressing

3-Month Goals:

- Independent HEP
- AROM in supine: elevation/scaption 140 degrees, ER as tolerated, progress in pain-free
- ROM
- AROM in standing: 0-90 degrees elevation
- *ROM exercises performed 2 times per day until max ROM is achieved, then performed daily for 3 months then performed 3 times per week. Strengthening exercises performed 3 times per week.

PHASE V (post-op week 13)

Precautions

- Overhead weight >20lbs

Treatment



317-208-3866

- **AROM/AAROM:** continue as above, increase ROM as tolerate by patient
- Continue AROM in standing: elevation/scaption and diagonal patterns
- **AAROM:** continue as above, increase ROM as patient tolerates
- **Resisted ROM:** strengthening of the shoulder girdle and well body
- **ADL's:** continue ADL's
- **Skill activities:** toss light ball with elbows and hands within view for reaction and timing

4-month Goals:

- Independent exercise program
- Pain free ADL's
- AROM in supine; elevation/scaption 160 degree, ER to 45 degrees, elevation/scaption
- Standing in 120 degree
- Catch light object (demonstrate good reaction and timing)