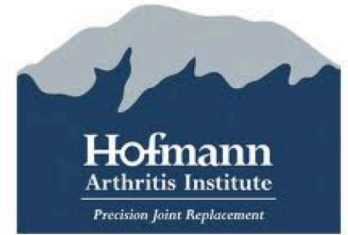


# Shoulder Replacement Rehabilitation Protocol/Rx

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**Pt:**

**Date of Surgery:**



Post-Operative Week

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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## Activities/Daily Living

Shower Without Sling																				
Sleep Without Sling																				
Discontinue Sling at Home																				
Discontinue Sling Away from Home																				

Post-Operative Week

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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## Passive Motion (PROM)

Passive Dangling																				
Elevation (performed in plane with scapula)																				
External Rotation (limit    degrees)																				
Extension																				
Internal Rotation																				

Post-Operative Week

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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## Active Motion (AROM)

Elbow & Wrist Active/Passive																				
Forward Elevation																				
Internal Rotation																				
External Rotation																				
Pulleys																				
Wall Climb (with active controlled lowering)																				

Post-Operative Week

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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## Strengthening (RROM) — Including Isometrics

Rotator Cuff (ER, IR, ABD)																				
Manual Resistance																				
Deltoid																				
POOL (water walking, ROM)																				

Strengthening progression should begin manually with low resistance and low repetition. Increase repetition **before** increasing resistance. No strenuous resistance for 5-6 months post surgery. Please call with any questions (801) 355-6468 or (800) 355-9445.