Hemi-Cap Humeral Head Replacement Post-Operative Rehabilitation Program

The goal of the rehabilitation process is to provide greater mobility to the patient then before the surgery. In addition, stability of the shoulder is vital and essential to normal non-painful shoulder function. The key to the success of the rehabilitation following total shoulder replacement is compliance to your exercise program.

I. PHASE ONE - IMMEDIATE MOTION PHASE (Week 0-4)

Goals: Allow early healing of capsule

Increase passive range of motion

Decrease shoulder pain

Retard muscular atrophy and prevent RTC inhibition

WEEKS 1-2

Sling for Comfort and Sleep

Exercises:

- Pendulum Exercises
- Passive Range of Motion
 - Flexion (0-75 degrees)
 - ER (in scapular plane at 10 to 15 degrees
 - IR (in scapular plane at 20 degrees to 25 degrees
- Elbow/Wrist ROM
- Gripping Exercise for Hand
- Ice & Modalities
- Isometrics (Day 10)
 - Abductors
 - ER
 - Elbow flexors

*No IR isometrics for 2-4 weeks

- * Electrical Muscle Stimulation (if needed)
- Rope and Pulley (POD 5-7) Flexion to 70/90 degrees with bent elbow to 90 degrees

WEEK 2: Passive Range of Motion

Flexion to tolerance (at least 125 degrees)

ER/IR @ 30 degrees abduction

- ER to 20 degrees
- IR to side

WEEKS 3-4

Sling as Needed Exercises:

- Continue all ROM exercises
 - Initiate AAROM & PROM exercises
 - Progress flexion to tolerance (at least 145 degrees)
 - ER @ 45 degrees abduction to 25-30 degrees
 - IR @ 45 degrees abduction to 50 degrees



- Initiate AAROM ER/IR supine with L-bar
- Initiate rhythmic stabilization exercises
 - Flex/Ext
 - ER/IR in scapular plane
- Isometrics
 - ER
 - Flex
 - Ext
 - Abd
 - Initiate IR
- Able to perform tubing ER/IR
- Able to perform AROM shoulder flexion (supine)
- Scapular exercises
 - prone rowing
 - prone extension
- Rope and Pulley

II. PHASE TWO - ACTIVE MOTION PHASE (Week 5-10)

Goals: Improve dynamic stabilization and strength

Improve Range of Motion Decrease pain/inflammation Increase Functional Activities

WEEK 5: Passive Range of Motion

- Flexion to 160 (at least)
- ER/IR @45 degrees abduction
 - ER to 50 degrees
 - IR to full

WEEKS 6-8:

Exercises:

- Active Assisted ROM Exercises with L-Bar (Begin week 2)
 - Flexion to tolerance
 - ER in scapular plane at 90 degrees abduction (ER to 55-60 degrees)
 - IR in scapular plane at 90 degrees abduction (IR to full)
 - All motions to tolerance
 - Rope and Pulley
 - Flexion
- Pendulum Exercises
- AROM Exercises
 - Supine Flexion if unable sidelying flexion
- Strengthening Exercises
 - Tubing ER/IR
 - Rhythmic stabilization Flex/Ext and ER/IR
 - Sidelying ER
 - Sidelying flexion
 - Scapular strengthening exercises
 - Prone rowing



- Prone extensions
- Biceps/triceps
- Full can
- Lateral raises

WEEKS 9-12

- Continue all exercises listed above
- Prone goal:
 - Flexion 180 degrees
 - ER at 90 degrees Abd: 75-80 degrees (or to tolerance)
 - IR at 90 degrees Abd: 60-65 degrees
- Continue to emphasize AROM and strength
- Progress strengthening exercises
 - Fundamental Shoulder Exercises
- Able to initiate light golf swings (week 10-12)

III. PHASE THREE - ACTIVITY PHASE (WEEKS 13-26)

- Initiation of this phase begins when patient exhibits:
 - PROM:
 - Flexion 0-160 degrees
 - ER 75 degrees
 - IR 60 degrees
 - Strength level 4/5 for ER/IR/ABD

Goals: Improve strength of shoulder musculature
Neuromuscular control of shoulder complex
Improve functional activities

Exercises:

- *AAROM and stretching exercises
 - Flexion with L-bar
 - ER/IR at 90 degrees abduction
- *Strengthening exercises
 - ER/IR tubing
 - Full Can
 - Lateral raises
 - Prone rowing
 - Sidelying ER
 - Prone extension
 - Biceps
 - Initiate interval sport program if appropriate (weeks 20-26)