Mr Mark S. Falworth MBBS FRCS(Eng) FRCS (Orth)

Consultant Orthopaedic Surgeon Shoulder and Elbow Surgery

Spire Bushey Hospital Heathbourne Road Bushey Watford Herts, WD23 1RD Royal National Orthopaedic Hospital Brockley Hill Stanmore Middlesex HA7 4LP The Stanmore Clinic HCA Elstree Waterfront The Waterfront Beaufort House, Elstree Rd. Herts, WD6 3BS

Appointments & Queries;
Practice Manager: Lynn Etherton
Telephone: 020 7042 1807
Fax: 020 7042 1808

Email: lynn.ertherton@phf.uk.com

All correspondence to Spire Bushey Hospital

Physiotherapy protocol: Reverse Shoulder Replacement (Cuff deficient)

Weeks 0-6:

- Pendular exercises, elbow ROM, wrist ROM, grip strengthening
- Remove sling and exchange to Collar and Cuff for bathing only
- Gentle passive / active assisted forward elevation to 120° FF and 20° ER
- No active IR / backwards extension for 6 weeks (as this will threaten the subscapularis reconstruction)

Weeks 6-12:

- PROM \rightarrow AAROM \rightarrow AROM at tolerated.
- No resisted internal rotation / backward extension until 12 weeks post-op
- Heat before PT, and ice after PT
- Goals: increase ROM as tolerated to 130° FE / 30° ER no manipulation
- Begin light resisted ER / FE / ABD isometrics and bands, concentric motions only
- No scapular retractions with bands
- Start eccentric deltoid exercise program as able

Months 3-12:

- ullet Begin resisted IR/ER (isometrics / bands); isomentric \to light bands \to weights
- Advance strengthening as tolerated; 10 reps / 1 set per exercise for deltoid, and scapular stabilisers
- Increase ROM to fill with passive stretching at end ranges
- Begin eccentric deltoid program, plyometrics, and closed chain exercises at 12 weeks.

Comments: