

Comprehensive Orthopaedics, S.C.

Total Shoulder Arthroplasty with Rotator Cuff Deficient

Dr. Jonathan Main, MD

	ROM GOALS	STRENGTH GOALS	FUNCTION GOALS
0-4 weeks	<p>* Goal with RC deficient pt. is joint stability, no pain and less joint mobility.</p> <p>PROM→AAROM (to tolerance)</p> <ul style="list-style-type: none"> • Flexion to 90° • Scaption to 60° • ER to 20° (30° of abd.) • IR to 30° (30° of abd.) • Progress to AAROM when able. <p>AROM</p> <ul style="list-style-type: none"> • Full elbow, forearm, wrist and hand motion without resistance 	<p>Submax Isometrics</p> <ul style="list-style-type: none"> • Flexion • Extension • ER • IR • Abduction <ul style="list-style-type: none"> • Forearm, wrist and hand strengthening 	<ul style="list-style-type: none"> • Sling or immobilizer for all ADL's and sleeping 7-10days and then for comfort reasons (Physician's discretion) • Sling in public as needed after 1-2 wks. • Achieve 0/10 pain rating at rest • Non-weighted below shoulder height ADL's.
4-8 weeks	<p>PROM→AAROM (to tolerance)</p> <ul style="list-style-type: none"> • Flexion to 100° • Scaption to 75° • ER to 30° (45° of abd.) • IR to 40° (45° of abd.) • Capsular mobilizations anterior, posterior, and inferior. • Progress to AROM when able <p>AAROM→AROM</p> <ul style="list-style-type: none"> • Flexion to 90° • Scaption to 90° 	<ul style="list-style-type: none"> • Initiate Isotonic for scapular stabilization and RC strengthening • CKC scapular stabilization exercises. • Initiate PNF, rhythmic stabilization 	<ul style="list-style-type: none"> • Normal use of eating utensils • Non-weighted above shoulder height ADL's. • Weighted below shoulder height ADL's. • Normal grooming, bathing and dressing. • Normal use of eating utensils
8 – 12 weeks	<p>PROM→AAROM (to tolerance)</p> <ul style="list-style-type: none"> • Flexion to 120° • Scaption to 100° • ER to 30°-40° (at 90° abd.) • IR to 45-55° (at 90° abd.) <p>AROM</p> <ul style="list-style-type: none"> • Patients usually never reach full AROM compared to contralateral side. 	<p>* Some patients may never progress to advanced strengthening exercises.</p> <ul style="list-style-type: none"> • Isotonic strengthening for entire shoulder complex • Focus on more functional strengthening • Progress PNF, rhythmic stabilization, and CKC for scapula and RC • Advance isotonic strengthening to above shoulder height • Advance PREs for scapular and rotator cuff 	<ul style="list-style-type: none"> • Initiate weighted overhead ADL's. • Achieve 0/10 pain rating with routine ADL's • Normal sleeping (affected side) and behind the back ADL's.



Kenosha Medical Center Campus
6308 Eighth Avenue
Kenosha, Wisconsin 53143
262-656-3290

LakeView RecPlex
9900 Terwall Terrace
Pleasant Prairie, Wisconsin 53158
262-577-8725

St. Catherine's Medical Center Campus
9555 76th Street
Pleasant Prairie, Wisconsin 53158
262-577-8989