

Protocol for:

- **Shoulder Hemiarthroplasty**

Wear Sling for 3 weeks

- Come out of sling to move elbow, wrist, and hand (3 x daily)
- OK to remove for shower, change clothes, eat, do physical therapy

**Precautions for 8 weeks:**

- Non-Weight Bearing for 8 weeks
- No supporting of body weight on involved side for 8 weeks
- No excessive shoulder motion behind back, especially in Internal Rotation
- No excessive stretching or sudden movements, particularly External Rotation
- Place a pillow under elbow while lying flat on back, so that you are able to visualize elbow while lying down, even when in sling

**Return to Activities:**

|   |             |
|---|-------------|
| •Computer •Eating •Holding a book<br>•Typing •Writing | Immediately |
| • Golf, Tennis  | 4 Months    |

**Rehab:**

|                                |           |   |
|--------------------------------|-----------|---|
| Phase 0                        | Week 0-1  | <ul style="list-style-type: none"> <li>• Encourage ambulation one day after surgery</li> <li>• Wear sling while out in public and sleeping for 3 weeks</li> <li>• Remove sling daily to move elbow, wrist and hand</li> <li>• Remove sling to eat, write, get dressed and shower</li> <li>• Pendulums</li> </ul>  |
| Phase I<br>(Passive ROM)       | Weeks 1-3 | <ul style="list-style-type: none"> <li>• <b><u>Passive ROM is NOT STRETCHING!!</u></b></li> <li>• <b><u>PROTECT THE SUBSCAPULARIS!!</u></b></li> <li>• Passive motion is designed to regain forward flexion and prevent post-op stiffness</li> <li>• Pendulums to warm up</li> <li>• Passive ROM                             <ul style="list-style-type: none"> <li>○ Supine FF to 140</li> <li>○ Supine ER to 30</li> <li>○ IR to belt line starting at 3 weeks</li> </ul> </li> </ul> |
| Phase II<br>(Active/Assistive) | Weeks 3-7 | <ul style="list-style-type: none"> <li>• Pendulums to warm up</li> <li>• Active Assistive ROM with Passive stretch to:                             <ul style="list-style-type: none"> <li>○ FF - full</li> <li>○ ER to 30</li> <li>○ IR gradually to full</li> </ul> </li> <li>• Active ROM                             <ul style="list-style-type: none"> <li>○ Supine → Seated FF to full</li> </ul> </li> </ul>  |

|                         |               |  |
|-------------------------|---------------|--|
|                         |               | <ul style="list-style-type: none"> <li>○ Supine → Seated ER gradually increase to full at weeks 5 &amp; 6</li> <li>○ IR – gradually increase to full</li> <li>● Patient should continue to work with therapist on regaining active ROM and therapist will work with the patient on regaining normal scapulohumeral rhythm.</li> <li>● “Walk the wall” exercises should be done everyday at home. The goal is to work up to 3 sets of 10, 3 times a day. You may use opposite hand to facilitate this exercise in the beginning.</li> </ul> |
| Phase III<br>(Resisted) | Weeks<br>7-12 | <ul style="list-style-type: none"> <li>● May not be needed</li> <li>● Patients will typically strengthen their shoulder on own by doing their daily “normal” activities.</li> <li>● <b>No Thera-Bands!!!!</b></li> <li>● Continue with Phase II and Pendulums to warm up</li> <li>● Continue stretching and ROM exercises on own as instructed by therapist</li> <li>● PRE’s for periscapular strengthening</li> <li>● Rows</li> <li>● Standing Forward Punch</li> </ul>   |

*ROM – Range of Motion*

*ER – External Rotation*

*FF – Forward Flexion*

*IR – Internal Rotation*

*PRE’s – Progressive Resistance Exercises*