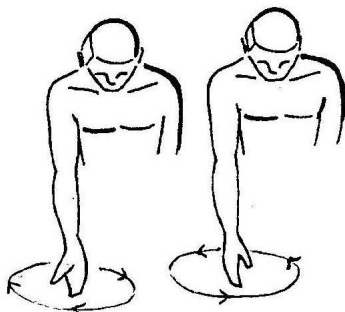


Rehabilitation after uncomplicated shoulder replacement (TSA)

www.albiqelimd.com

Week One

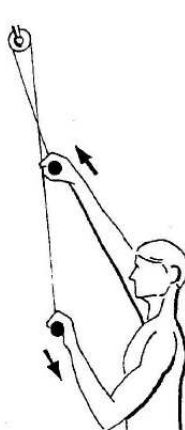
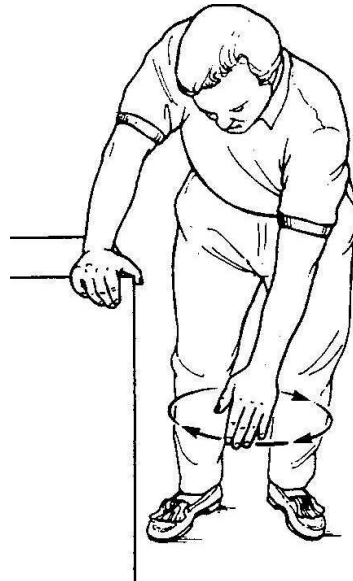
1. May change dressing as needed.
2. May shower, but do not bathe, do not immerse in water. Dry wound afterwards.
3. Wear sling as needed, especially when outside your home
4. May not drive.
5. Perform finger, hand, wrist, and elbow motion exercises to keep those joints supple and to help with circulation
6. Perform pendulum exercises three times daily, 10 minutes each
7. Active assisted and passive range of motion exercises as tolerated, with therapist's help.
8. **No active internal rotation against resistance.**



Pendulum Exercises

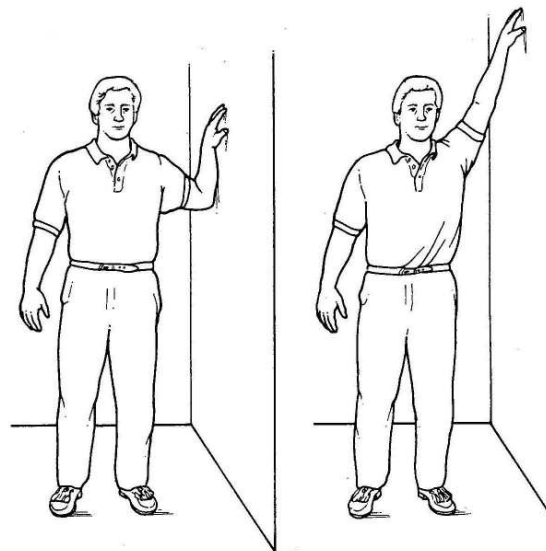
Standing —

- (A) Bending over at waist, circle entire arm clockwise, palm facing forward.
(B) Bending over at waist, circle entire arm counter-clockwise, palm facing backward.



Pulley Exercises

Standing — Good arm supplies the power to bring the arm as near the pulley as possible.

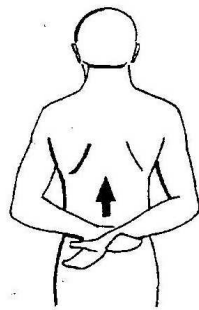


Week Two to Six

1. At 2 weeks after surgery, follow up with Dr Qeli to examine operative wound and remove sutures if necessary
2. Continue physical therapy for range of motion
 1. Emphasize forward elevation
 2. No strengthening yet
3. Continue to avoid active internal rotation against resistance

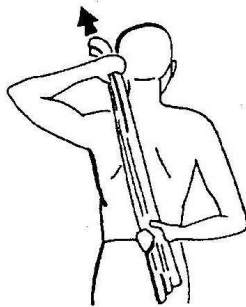
After Six weeks

1. Continue work on full range of motion
2. May start working on strengthening, including subscapularis



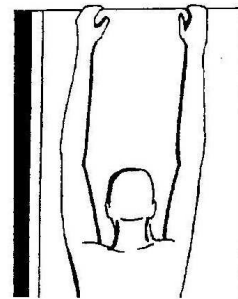
Assisted Internal Rotation

Standing — Grasp wrist of the operating arm with the good hand behind back, slide hands up and down.



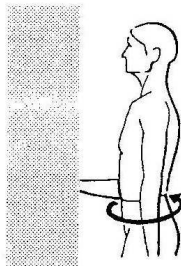
Internal Rotation

Standing — Behind low back, pull hand up as high as possible using a towel.



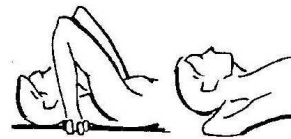
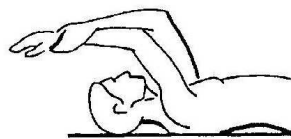
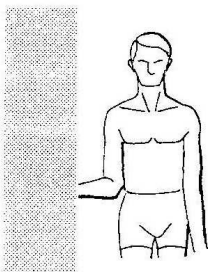
Forward Elevation

Facing an open door, assist arm up, hook fingertips on top of door. Bend knees slightly to stretch. Use a stool if necessary.



External Rotation

Standing in a doorway with elbow flexed to 90° and held close to body, place palm on door jamb, slowly turn body away from arm.



Assisted External Rotation

Lying on back — Grasp wrist of operated arm with good hand, reach up and overhead, clasp hands, then slide hands down behind neck while spreading elbows. Reverse by sliding clasped hands upward, out from under neck.