

## **PHYSICAL THERAPY PRESCRIPTION**

DIAGNOSIS ( LEFT / RIGHT ) TOTAL SHOULDER REPLACEMENT OR HEMIARTHROPLASTY  
DATE OF SURGERY \_\_\_\_\_

### **SHOULDER SURGERY PHYSICAL THERAPY PRESCRIPTION**

#### **STAGE I: PASSIVE AND ASSISTED RANGE OF MOTION**

- Week 1:        Passive supine Forward Flexion  
                 Assisted supine Forward Flexion  
                 Assisted ER to neutral  
                 Assisted Extension
- Week 2:        All Week 1 exercises plus:  
                 Assisted horizontal ER (supine)  
                 Assisted horizontal ADD, ABO  
                 Passive IR  
                 Isometrics - ER, posterior and middle Deltoid

#### **STAGE II: ACTIVE RANGE OF MOTION AND MUSCLE**

- Week 3:        All Week 1-2 exercises plus:  
                 Active supine Forward Flexion with Elbow flexed  
                 Active Forward Flexion raising arm from table top  
                 Gradual Increase of activities from supine to vertical position  
                 Progress to Active Flexion, Extension, ABO and ER
- Week 4:        All exercises above plus:  
                 Begin Active IR  
                 Gradual increase of Active ROM exercises  
                 Theraband exercises for Flexion, Extension, ER  
                 Light Resistive exercises

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### **Stage III: FINAL STRENGTHENING**

Month 3: Increase Resistive exercises, continue gentle PROM and AROM unlimited

Month 4: Begin Resistance exercises using weights

### **GOALS:**

90° degrees of Active Elevation by 3 months post-op.  
Over 90° degrees of Active Elevation by 4 months post-op.  
Rehabilitation should be continued for one year.  
Expected pain relief is good.  
Improvements in strength and range of motion are variable.

### **ADDITIONAL INFORMATION / INSTRUCTIONS:**

Treatment: \_\_\_\_\_ times per week      Duration: \_\_\_\_\_ weeks

Physician's Signature: \_\_\_\_\_

Date: \_\_\_\_\_