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Patient Name:

Date:

Date of surgery:

Visit per week:

**PHYSICAL THERAPY PRESCRIPTION:**

**TOTAL SHOULDER ARTHROPLASTY**

**Weeks 2-6: Phase I**

Sling Immobilizer: At all times except for showering and exercise. (Sleep in sofa recliner)  
**Total of 6 weeks in the Sling and the Abduction pillow**

Exercises: Pendulums ok 2 weeks after surgery  
Passive ER to 10 degrees and extension to neutral  
Passive supine FF **in scapular plane** to 130 (**NO aggressive stretching and NO PAIN**)  
AROM wrist/elbow  
Submax (50%) pain free deltoid isometrics in neutral  
Scapular “pinches”  
Modalities as needed

Advancement Criteria: ER the above set criteria  
FF in scapular plane to 130  
Minimal pain and inflammation with motion and exercise  
Incision is well healed with no drainage and no redness

**Weeks 6-10: Phase II**

Sling Immobilizer: Discontinue at week 6

Exercises: Passive & Active assisted FF in scapular plane – no limits (wand exercises, pulleys)  
Passive & Active assisted ER – limit 45 deg

Active supine FF in scapular plane  
Manual scapular side-lying stabilization exercises  
Isometrics: Deltoid in neutral  
    ER (modified neutral) ROM < 30 deg  
    IR (modified neutral)  
Scapular retraction with elastic bands  
Humeral head control exercises:  
    ER/IR (supine/scapular plane)  
    Elevation at 100 deg  
Modalities as needed

Advancement Criteria: FF to 150  
    ER to 45  
    Good humeral head control  
    Minimal to no pain with ADLs

### **Weeks 10-16: Phase III**

Exercises: Progress ROM as tolerated  
AAROM for full FF and ER  
AAROM for IR – no limits  
Flexibility exercises: towel stretch, posterior capsule stretch  
IR/ER/FF isotonic strengthening  
Scapular stabilization  
Rhythmic stabilization  
PREs for scapula, elbow (biceps/triceps)  
Forward flexion in scapular plane  
Progressive resistive equipment: row, chest press (light weight)  
Modalities as needed

Advancement Criteria: Muscle strength 4/5  
    Passive FF 160, ER >45  
    Restore normal scapulohumeral rhythm <90 deg elevation  
    Minimal pain and inflammation

### **Weeks 16-22: Phase IV**

Exercises: Access and address any remaining deficits in ROM, flexibility, strength  
Active, active-assisted, and passive ROM exercises  
Flexibility exercises: towel stretch (IR), posterior capsule stretch  
Progressive resistive strengthening:  
    Dumbbells  
    Progressive resistive equipment  
    Elastic band IR/ER (modified neutral)  
Rhythmic stabilization  
Modalities as needed  
Individualize program to meet specific needs of patient

**Discharge Criteria:** Maximize ROM  
Full independent ADLs  
Normal scapulohumeral rhythm >100deg elevation

\* Please Send Progress Notes \*

**Signature:** \_\_\_\_\_

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