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## TOTAL SHOULDER AND HEMIARTHROPLASTY PHYSICAL THERAPY PROTOCOL

Name				Date
Diagnosis s/p RIO	GHT/LEFT Total SI	houlder Arthropla	asty Hemiarthroplasty	
Date of Surgery		<del></del>		
Frequency:	times/week	Duration:	Weeks	
Week 0-1: Patient strengthening)	to do Home Exercis	ses give post-op (	pendulums, elbow RO	M, wrist ROM, grip
No active IR/back and then repaired a regenerate a blood ROM goals: Week ROM goals: Week No resisted interna	I→AROM as tolerary wards extension for afterwards. It takes and nerve supply. k 1: 90° FF/20° ER	6 weeks. The su about 4-6 weeks at side; ABD ma at side; ABD ma extension until 1	for it to grown back in x 75° without rotation x 75° without rotation 2 weeks post-op	
Goals: Increase RC Begin light resisted No resisted interna	AROM for internal OM as tolerated with	n gentle passive s netrics and bands ls extension until	tretching at end ranges, concentric motions or	
Advance strengthe stabilizers Increase ROM to f	BE (isometrics/band ening as tolerated; 10 full with passive stre	0 reps/1 set per exetching at end ran	ight bands→weights xercise for rotator cuff, ges exercises at 12 weeks	-
Functional Ca	apacity Evaluation	Work Hard	ening/Work Condition	ing Teach HEP
ModalitiesElectric Stimul beforeIce after	lationUltrasou rTrigger points	nd Iontopho massage Th	oresis Phonophore	esisTENS Heat
Signature			Date	