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Anatomic Shoulder Replacement (Hemiarthroplasty versus Total) Post Operative Rehabilitation Protocol

Immediately Post Op:

- Use ice on shoulder 15-minute intervals until your next clinic visit.
- Take your pain medication as needed and as prescribed. Call if any questions or concerns arise.
- May shower if good seal to surgical dressing.
- Sling at all times until block has completely worn off, then can wean as soon as tolerable.
- Recommend sling when sleeping.
- Okay to begin pendulum exercises once block has worn off.
- Do not externally rotate arm beyond 20* unless instructed otherwise.

Precautions:

- Always avoid pushing up out of a chair, for the first 3 months.
- Watch for signs of infection and call clinic or ER immediately if these signs develop:
 - Fever higher than 100°F, shortness of breath, or warmth, redness, and/or increased drainage coming from your incision site.
- Watch for signs of blood clots and go to the ER immediately if these signs develop:
 - Excessive increase in swelling, hardness, pain, or redness in forearm or calf.
- Do not drive until off of opioid pain medications.
- Do not lift objects > a normal diner sized cup of coffee for 6 weeks.

2 Weeks Post Op:

- Follow up appointment in clinic, including in-clinic x-rays.
- Progressively increase use of hand for everyday activities, i.e. brushing teeth, eating, and drinking.
- 0-90° forward flexion (shoulder height) and 3 lbs. max for 6 weeks.
- Focus on stretching. Strength will come with time. Begin progressive strengthening at 2 months

12 Weeks Post Op:

- Follow up appointment in clinic.
- Additional follow up before 1 year post op visit dependent on progress noted at this visit.

Considerations:

- Continue home exercise program with progressive strengthening.
- May expect to return to moderate activities such as golf, tennis, and some fishing at 3 months.
 Occasionally this will take up to 6 months. Expect release to full activities such as hunting between 4-6 months.
- Continued improvement can occur for 1-1 ½ years but be aware that full strength and range of motion may never be fully achieved depending on case.

Note: These instructions are to serve as guidelines and are subject to Physician discretion. Actual progress may be faster or slower depending on the individual.