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Patient Sticker Here

Date

**Dx:** s/p ( LEFT/RIGHT ) TOTAL SHOULDER ARTHROPLASTY / HEMIARTHROPLASTY

**Date of Surgery:**

**TOTAL SHOULDER ARTHROPLASTY / HEMIARTHROPLASTY PROTOCOL**  
**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, ABD  
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, ABD 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

**STAGE III : FINAL STRENGTHENING**

Month 3 :

Increase Resistive exercises

Month 4 :

Begin Resistance exercises using weights

**TOTAL SHOULDER ARTHROPLASTY / HEMIARTHROPLASTY PROTOCOL**  
**PHYSICAL THERAPY PRESCRIPTION (PG 2)**

**GOALS :**           90 degrees of Active Elevation by 4 months post-op.  
                          Over 90 degrees of Active Elevation by 6 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: 2 – 3 times per week**

\*\*Please send progress notes.

**Physician's Signature:** \_\_\_\_\_  
**Seth C. Gamradt, MD**