PATIENT EDUCATION: *0-2 weeks post-operatively* REVERSE TOTAL SHOULDER ARTHROPLASTY (rTSA)

General Information

rTSA is used for treatment of shoulder joint arthritis when it is associated with irreparable rotator cuff damage or complex fractures as well as revision of previously failed Total Shoulder Arthroplasty in which rotator cuff tendons are deficient.

The surgery reverses the orientation of the shoulder joint which replaces the rotator cuff with the deltoid muscle as the primary elevator of the shoulder.



- **Dislocation precautions:** should be implemented for 12 weeks post-op unless surgeon specifically advises patient or therapist differently
 - No shoulder motion behind back (No combined shoulder adduction, internal rotation and extension)
 - No shoulder extension beyond neutral, when lying on your back the elbow should be supported by a pillow or towel to avoid extension and patient should always be able to visualize elbow while lying on their back
- Sling is worn up to 6 weeks post-op and only removed for exercise or bathing as directed
- No shoulder active range of motion (AROM)
- No lifting of objects or supporting body weight with operative extremity
- Keep incision clean and dry, no soaking or wetting for 2 weeks, no whirlpool, Jacuzzi for 4 weeks

Acute Care Therapy: Post surgical

- No shoulder motion for first 2 weeks
- Active/active assisted range of motion of neck, elbow, wrist and hand
- Continuous use of ice for first 72 hours post-op, then frequently about 4-5 times a day for about 20 minutes
- Insure proper alignment, fit and use of sling

Goals

- Patient and family independent with joint protection, assisting with putting on/taking off sling, home exercise program, use of ice to reduce pain and swelling
- Promote soft tissue healing and maintain integrity of replaced joint
- Restore AROM of elbow/wrist/hand
- Independent with activities of daily living (ADLs) with modifications
- Modified independence with bed mobility, transfers and ambulation or as pre-admissions

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