

**Dr Kumar Shoulder Replacement Protocol**

**Revised 6<sup>th</sup> April 2020**

**Prehab (STAGE 0)**

- scapulothoracic retraining
- cuff strengthening
- full ROM (if weakness due to cuff tear, aim for full passive ROM)
- monitor for adhesive capsulitis (if concerns, contact Dr Kumar)

**0-6 weeks (STAGE 1)**

- full passive ROM **EXCEPT ER to neutral only** (must protect subscapularis)
- scapulothoracic retraining and humeral head positioning exercises
- pendular exercises
- grip strength exercises
- elbow and wrist ROM (PROM elbow if biceps tenodesis)
- may come out of sling for
  - eating
  - drinking
  - showering
  - relaxing (ie, watching TV, computer use)

**6 weeks-3 months (STAGE 2)**

- full AROM (ER within painful limits only)
- **no active IR until 12 weeks**
- elbow and wrist AROM
- may come out of a sling but should wear if in social situation where protection of repair is not guaranteed (ie, a busy shopping centre)

**3-6 months (STAGE 3)**

- full AROM including IR
- elbow and wrist ROM (progress to AROM elbow as for progression with cuff repair)
- progressive activation of upper limb kinetic chain
- Theraband cuff strengthening



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**6+ months (STAGE 4)**

- progress strengthening and dynamic upper limb activity
- reintegrate sport-specific activity and manual labour
- phase of return to pre-injury level of function

**Timing of Dr Kumar's Post-Operative Appointments**

- **2 weeks (Clinical Nurse Specialist)**
- **8 weeks**
- **6 months (if required)**
- **1 year**

**If you have any concerns during prehab/rehab please contact Dr Kumar directly for assistance or more urgent follow-up.**