



Day 1-3:

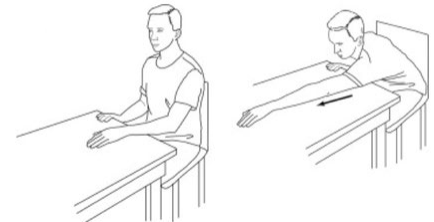
- Prior to leaving the operating room, a shoulder immobilizer sling will be applied to your shoulder.
- Control swelling. Following discharge from the primary surgery, you should go home and rest, elevate your extremity and use ice to bring down swelling for 20 minutes, once per hour.
- Control pain. You will be sent home with a prescription for pain medications. You may take over-the-counter medications such as Tylenol or Motrin for baseline pain and add the prescription medication for more severe pain, if needed.

We can increase the pain medication if you're uncomfortable. Feel free to call the office at **650-723-5256** or call the surgery scheduler. If it is after hours, there is always someone available at Clinical Advice Services at **650-723-4000**.

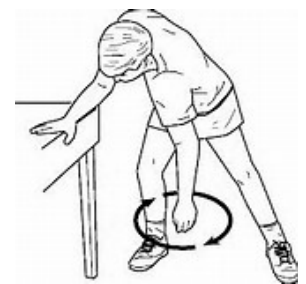
Weeks 0-6:

- The sling should be worn 90% of the time. You can come out of sling to eat or type on a computer. You must wear sling to sleep at night.
- **No active range of motion (AROM) of the shoulder is allowed.**
- **Start passive shoulder range of motion (PROM) exercises:**
 - **Pendulums 2-3 times daily for 2-3 minutes.**
 - **Table slides 2-3 times daily for 2-3 minutes.**
- Progress from PROM to AROM elbow. AROM wrist and digits.
- Starting after 2 weeks post op: You may start formal physical therapy for PROM shoulder as well as scapular motion, with restrictions:
 - Passive external rotation to 30° max
 - Passive forward elevation to 130° max
- No cane or pulley exercises yet because these are active assisted range of motion (AAROM) exercises.

Table Slides



Pendulum



Weeks 6-8

- Discontinue sling.
- Start AAROM shoulder and advance to AROM shoulder (no ROM restrictions)
- You may use the arm for activities such as dressing, grooming, and eating.
- No shoulder strengthening yet.

Weeks 8+:

- Pending healing on x-rays at your 6-week post-op visit, you may gradually progress strengthening exercises after 8-12 weeks post-op.
- Continue to work on shoulder AROM.

You have a prosthetic component which is susceptible to mechanical loosening or dislocation. You should not engage in heavy manual labor for the lifetime of your prosthesis, including weightlifting more than 15 pounds overhead.