



## TSA Protocol Dr. Murphy

Time Frame	Treatment	Goals
Post-Op Day	<ul> <li>Dressing change</li> <li>Instruction in signs and symptoms of infection</li> <li>Removal of pain pump</li> <li>Instruction in cryotherapy</li> <li>Instruction in pendulum exercise, fist pumps, elbow ROM and AAROM into flexion using opposite upper extremity</li> </ul>	<ul> <li>Independent in HEP of AAROM shoulder flexion, fist pumps, elbow ROM, pendulum exercise, scapular retraction, shoulder shrugs and cryotherapy</li> </ul>
Phase I 0-6 weeks	<ul> <li>Patient is to continue with independent HEP from AAROM shoulder flexion and pendulum exercises. Patient is to wear sling for 6 weeks</li> <li>Limit passive ER to 30°</li> <li>Dr. Murphy will order therapy again after his 6-week post-op check.</li> </ul>	<ul> <li>Progression of HEP as tolerated</li> <li>No in-clinic therapy</li> </ul>
Phase II 6-12 weeks	<ul> <li>Frequency= 3x/week until ROM and strength are approaching WNL. Discharge sling at 6 weeks</li> <li>PROM all directions, progress as tolerated</li> <li>AAROM all directions as tolerated</li> <li>Isometrics can begin at 6 weeks</li> <li>Instruction in AROM at 8 weeks</li> <li>Instruction in PRE's at 12 weeks</li> <li>Begin in-clinic strengthening as tolerated at 12 weeks for shoulder/elbow and scapular stabilizers. Progress as tolerated.</li> </ul>	<ul> <li>ROM WNL at 10-12 weeks in all directions</li> <li>Independent in PRE's at 12 weeks for progression independently</li> <li>Strength progressed as tolerated in clinic</li> </ul>
Phase III 12-16 weeks	<ul> <li>Frequency = 2x/week</li> <li>Continue to progress ROM and strength until WNL/WFL in all directions</li> </ul>	<ul> <li>ROM WNL/WFL- discharge when goal met.</li> <li>Independent in HEP for shoulder strengthening and scapular stabilization</li> </ul>
Phase IV 4-6 months	• Frequency = PRN	<ul> <li>Progress all ROM and strength to WNL if still not present</li> </ul>