

EXERCISES

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Before your surgery, perform these exercises, as allowed by your surgeon, to help increase your strength and improve your overall comfort. Begin them a month or two prior to your surgery, if possible. **10-15 repetitions, 3 times a day, focusing on the muscles involved in each exercise.**

After your surgery, your surgeon will inform you of any shoulder precautions, and what motions and activities are safe for you to perform while your shoulder heals. Ask your surgeon or therapist if you have any questions on your approved motions.



Pendulum: Begin standing with your trunk bent forward, using your unoperated arm for support on a table or countertop and your surgical arm hanging straight towards the ground. Slowly shift your body weight in a circular motion, letting your hanging arm swing in a circle at the same time. Make sure the movement comes from your body not your arm muscles.



Forearm Pronation & Supination: With your arm in sling or supported on a table or countertop, slowly turn your palm up toward the ceiling, pause briefly, then turn your palm down. All motion should come from your wrist and forearm.

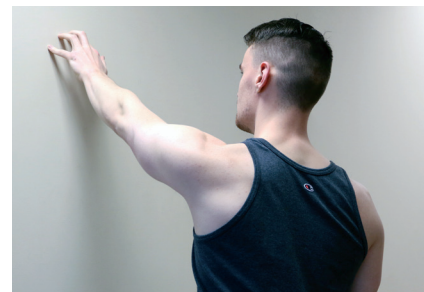


Scapular Stabilization: While seated, with your shoulders relaxed and your forearms supported, slowly squeeze your shoulder blades together. Hold for 10 seconds, without raising your shoulders, then slowly relax.



Assisted Shoulder Flexion: Begin in a standing upright position. Use your unoperated arm to help raise your surgical arm in front of your body as high as you can. Make sure to keep your surgical shoulder level and do not arch your back as you raise your arm. You should be supporting the movement of your surgical arm through the whole motion.

Active Shoulder Flexion/Wall Walk: In a standing upright position, start with your arms straight and your hands resting on a wall at shoulder height. Slowly walk your hands up the wall with your fingers one at a time. Make sure to keep your body straight during the exercise. Only walk your hands as far as you can without feeling any pain.



ACCESS TO UNDERARM AND BATHING: Your doctor will inform you when you are able to let water run over your incision. While standing or seated, remove your arm from your brace; let it rest down at your side. While holding onto a sturdy counter or table with your unoperated arm, bend forward at your waist, let gravity pull your operated arm away from your torso. This position allows you access to wash your underarm and apply deodorant. Ask your therapist about other assistive devices you may benefit from, including a shower chair or long handled sponge.

DRESSING:

Upper Body - Oversized pull-over T-shirts two sizes larger than your normal are preferred after surgery as they are easier to manage. Brace your unoperated arm on a sturdy counter or table, bend forward at your waist, let gravity pull your arm down and away from your torso. Use your unoperated arm to put the sleeve on your operated arm up to your shoulder. Standing up, let your surgical arm rest at your side while you put your unoperated arm into the other sleeve and use your unoperated arm to pull your shirt over your head.



Lower Body - It may be easier to use elastic waist band pants and easy slip-on shoes. You may also benefit from a long-handled shoe horn in order to provide ease when putting on shoes. If you are having difficulty reaching down for pants, consider using a reacher and for assistance with socks using a sock aide.

TOILETING: If your surgical arm is your dominant arm, practice using the restroom with your non-dominant arm before surgery. Ensure you are able to stand from your toilet without pushing up with your surgical arm.

HOUSEWORK: You will need assistance for two-handed activities including opening jars, preparing food, mowing the lawn, etc. If you frequently use certain items that are stored in hard-to-reach spots it may be beneficial to relocate them to waist level or within easy reach. If your surgery is performed on your dominant arm, practice writing and signing your name with your non-dominant hand.

SLEEPING: If ordered, sleep with your arm in a shoulder sling, unless otherwise specified by your surgeon.

EATING: If dominant hand has undergone surgery, consider using a bowl or plate with a raised side as it is easier to use your non-dominant hand while pushing food onto the utensil.

