

AC Joint Reconstruction

Phase I (1 – 5 days post-op.)

- Edema: Edema control interventions
- Sling: Ultrasling worn continuously except in therapy or during exercise sessions until 4 weeks.
- ROM
 - Scapular retractions
 - A/PROM of the elbow, wrist, and digits
- Strengthening
 - Isometric grip strengthening
- Modalities: PRN for pain & inflammation

Phase II (5 days – 4 weeks post-op.)

- Edema: Edema control interventions
- Sling: Ultrasling worn continuously except in therapy or during exercise sessions until 4 weeks.
- ROM
 - Continue Phase I
 - Initiate shoulder pendulums avoiding horizontal add/abd swinging

Phase III (4 wks – 10 wks post-op.)

- Wound: Monitor site / scar management techniques
- Edema: Edema control interventions
- Sling: D/C pillow on sling at 4 weeks. Sling continue to be worn outdoors or in public settings for an additional 2 weeks. D/C sling at 6 weeks post op.
- **Week 6**
- ROM
 - Begin PROM of the shoulder to flexion 90 degrees and abduction 90.
 - PROM IR and ER: begin as tolerated in painfree range with arm at 0-45 degrees of abduction, progress to 90 degrees abduction at 8 weeks postop.
 - Begin pulleys to 90 degrees of flexion only.
 - **Note: Restrict horizontal abduction and adduction of the shoulder.**
- Strengthening
 - Isometric strengthening: IR, ER, abduction, extension and bicep/tricep.
 - No resisted shoulder flexion.
- **Week 7**
- ROM
 - A/AAROM may begin within the same range as allowed for PROM week 7 (flexion 90, abd 60).
 - A/AAROM IR/ER in neutral or 0 degrees of abduction.
- **Weeks 8-10**
- ROM
 - Gradually progress to full painfree PROM
 - Begin PROM IR/ER stretching at 90 degrees of abduction
- Strengthening
 - Gradually progress to full AROM



ROCKFORD ORTHOPEDIC

- Begin *light* resisted shoulder flexion
- Begin rhythmic stabilization exercises for the shoulder for flexion and extension avoiding resisted horizontal add and abd.
- IR/ER strengthening below 90 degrees of shoulder elevation.
- May begin UBE and PNF.
- Initiate *light* isotonic resistance program.
- No shoulder press, bench press, pectoral deck, pullovers, resisted horizontal abduction and adduction.

Phase IV (10 wks + post-op.)

- **Week 10**
- Strengthening
 - Continue to progressive resisted strengthening for the shoulder.
 - Initiate light bench press and shoulder press with dumbbells (progress weight slowly).
 - Initiate lat pull downs and rows.
 - Progress resisted PNF patterns.
 - Initiate strengthening of external and internal rotation at 90 degrees of abduction.
- **Week 12**
- Strengthening
 - Progress resistance exercise levels and stretching.
 - Progress to closed chain strengthening activities.
 - Transition to weight room strengthening and initiate interval sports program. (Per MD approval)
 - Progress to Work Conditioning Program or Sports Specific Training. (Per MD approval)

Adapted from:

- 1.) Reinold MM, Wilk KE et.al. Current Concepts in the Rehabilitation following Acromioclavicular joint stabilization using biodegradable material. J Orthop Sports Physical Therapy 2006; 242-243
- 2.) Shoulderdoc. Acromioclavicular joint stabilization (Weaver Dunn), available at: <http://www.shoulderdoc.co.uk/article.asp?article=72§ion=206> Accessed 10-30-2008.
- 3.) Wilk KE, Reinold MM, Andrews, JR. Acromioclavicular Joint Reconstruction Using Synthetic Material Accelerated Rehabilitation Protocol (for Athletes). Winchester MA: Advanced Continuing Education Institute, 2004.