

Acromioclavicular Joint Reconstruction REHAB Protocol

PHASE I – Immobilization Phase (0-6 weeks)

Goals:

1. Allow healing of soft tissues
2. Early protected ROM
3. Decrease pain/inflammation
4. Slow down muscle atrophy

Precautions:

1. Ultra sling for 6 weeks. Arm must never be unsupported when patient is upright
2. for the first 2 weeks remove sling for hygiene
3. At 2 weeks patient may start to perform exercises
4. The weight of the arm and scapula places tremendous static forces on the ligament reconstruction

Range Of Motion: *Passive while patient is supine*

1. Gradual increase in flexion and abduction in the scapular plane; limit flexion to 70 degrees and abduction to 70 degrees for the first 4 weeks, then increase as tolerated.
2. No restriction on glenohumeral ER and IR
3. Restrict glenohumeral extension as it causes the largest amount of stress on the reconstructed ligaments.
4. Very gentle mobilizations and manual stretching by PT
5. Begin deltoid and RTC isometric exercises at week 4.

PHASE II – intermediate phase (Weeks 7-12)

Criteria: *minimal pain and inflammation*

Goals:

1. Improve muscular strength
2. Gradual increase in ROM
3. Decrease pain/inflammation

Exercises:

1. Ultrasling may be discontinued
2. Continue deltoid and RC isometric exercises
3. AAROM progression weeks 7 and 8
4. AROM progression weeks 9-12
5. Glenohumeral extension is unrestricted after week 10
6. Full ROM (excluding extension) should be achieved by week 12
7. Continue to avoid contact activities

PHASE III – Strengthening Phase (Weeks 12-18)

Criteria: *minimal pain and inflammation*

Goals:

1. Improve strength, power, endurance
2. improve neuromuscular control
3. normalize ROM
4. normalized arthrokinematics

Exercises:

1. Start resisted glenohumeral and scapular exercises with light weights
2. emphasis should be placed on strengthening the scapular stabilizers
3. gradual strengthening activities as tolerated
4. no pressing activities or lifting from the floor, such as a deadlift
5. continue to avoid contact activities

PHASE IV – Return to Activity Phase (4.5 months +)

Criteria: *full painless ROM, satisfactory clinical exam, muscle strength that fulfills work/sport requirements*

Exercises:

1. Progress previous strengthening program – continue to increase weight resistance with isotonics
2. Add total body conditioning, including strength and endurance training if appropriate
3. Initiate appropriate interval throwing, pitching, tennis, and golf program as appropriate
4. Power athletes may require 6-9 months to return to peak strength
5. Return to sport, work, prior activity level unrestricted

Red Flags: *Ok to have mild discomfort with exercises, but if it persists >1 hour, the intensity of the exercises must be decreased*

If there is an increase in night pain, the program must be altered to decrease the intensity