

Post-Operative Therapy: AC Joint Reconstruction

Note: This pathway is designed to serve as a guide to rehabilitation. Indications for progression should be based on patient's complete operative procedure, functional capacity and response to treatment.

Initiation of PT:

- 2-4 weeks PO
- Dictated by surgeon

Sling Wear

• 24/7 x 4 weeks

Rehabilitation Phase | Phase 1 | Weeks 1-6 Post-Operative

- PROM guided by pain
- Supine self PROM flexion (90 deg)
- Table wash
- AROM Elbow/wrist/hand
- Continue modalities (reduce inflammation and pain)

Precautions/Limitations

- No lifting
- External rotation at 90 degrees abduction limited to 45 degrees through 6 weeks
- No push-up type exercises/bench press/military press x3 months. Then start light and slow as tolerated
- Forward flexion limited to 90 degrees thru 6 weeks

Goals

- Pain-free AAROM
- Reduce muscle atrophy
- Decrease pain and inflammation

Rehabilitation Phase | Weeks 4-6 Post-Operative

- PROM progressed as tolerated
- AAROM progressed as tolerated
- Prone Clocks
- CKC exercises
 - Horizontal (table)
 - Vertical (wall)
- Scapular stabilization exercises
- Continue GH inferior mob (grade 2)
- Continue wrist and elbow PRE's
- Sub maximal isometrics
- Initiate trunk exercises
- Continue modalities as necessary
- UBE 0 resistance

Goals

- Pain-free PROM/AAROM
- Decrease pain and inflammation

Rehabilitation Phase | Phase II | Weeks 6-8 Post-Operative

- DC sling, start AROM
- Normalize AROM (full in all planes)
- Low resistance UBE forward/backward
- Scapular stabilization exercises: elevation, depression, retraction, protraction in lateral stance position with involved hand on wall
- Initiate tubing 6 weeks (punch, pull, ER, and IR)
- Protected loading (modified push-ups on wall, ball on wall)
- Initiate isotonic (increase wt) ER at 0
- Continue inferior mob (+and/posterior mob as indicated)
- Prone Clock (start without wt first)
- Proprioceptive and manual control drills
- Continue modalities pro
- Instruct postural exercises

Goals

- Increase muscular strength
- Min-0/10 pain
- Improve neuromuscular and proprioceptive control (i.e., body blade)
- Normal scapulohumeral rhythm

Rehabilitation Phase | Phase III | Weeks 8-12 Post-Operative

- Eccentric cuff and scapular exercise as need
- Forward elevation to 170 (full can-thumb up)
- UE plyometric drills (2 handed)
- Chest press, push-ups, serrates push-ups in protected ROM
- Diagonal patterns with LE reaches
- UE endurance exercises
- Running/treadmill running progressions (if appropriate)

Rehabilitation Phase | Phase IV | Weeks 12-16 Post-Operative

- Start functional activities/exercises
 - o Overhead sport program initiated 12-14 weeks per approval of physician
- Advance 1 arm plyometrics
- Weight training, light weight
- Return to sport programs 4-6 months
- Contact sports 8-12 months, or on physician clearance

DC Goals

- 0-3/10 pain scale
- Min-to-0 palpable tenderness on clinical exam
- Transition to home/gym HEP
- AROM WFL all planes
- Strength 4 to 4+/5 depending on skill level and ADL's