

## **Acromioclavicular Joint Reconstruction Using Synthetic Material Accelerated Rehabilitation Protocol (for Athletes)**

### **PHASE I – MOTION PHASE (Weeks 0-2)**

**Goals:** Initiate ROM exercises  
Retard muscular atrophy  
Decrease pain/inflammation

**Range of Motion Exercises:**

- L-bar AAROM
  - Flexion to tolerance
  - ER/IR (begin at 45 degrees abduction, progress to 90 degrees abduction) motion to tolerance
- Rope and pulley scaption
- Pendulum exercises
- Self-capsular stretches

*\*Note – Restrict horizontal Abduction/Adduction (often painful)*

**Strengthening Exercises:**

- Isometrics
  - ER, IR, Abd, Ext, Biceps, Triceps
- \*Note – No resisted shoulder flexion*
- Initiate ER/IR with exercise tubing at 0 degrees abduction when pain free (usually week 2)

**Decrease Pain/Inflammation:**

- Ice, NSAIDS, modalities
- Ice applied directly over AC joint

### **PHASE II – INTERMEDIATE PHASE (Weeks 3-8)**

**Goals:** Gradually regain full ROM  
Regain and improve muscular strength  
Normalize arthrokinematics  
Improve neuromuscular control of shoulder complex

**Criteria to Progress to Phase II:**

1. Nearly full ROM
2. Minimal pain and tenderness
3. Stable AC joint on clinical exam
4. Good (4/5) MMT of ER/IR/Abd

**Week 3**

- Range of motion exercises
  - Continue AAROM with L-bar
  - Shoulder elevation to at least 160 degrees by week 4
  - ER/IR at 90 degrees abduction full ROM
- Strengthening exercises
  - Initiate isotonic strengthening (light resistance)
    - Shoulder abduction
    - Shoulder extension
    - Shoulder ER/IR tubing
    - Sidelying ER
    - Biceps/triceps

- Prone horizontal abduction
- Prone rowing
- Prone extension
- *\*Note – Restricted shoulder flexion prohibited (for 4 weeks)*
- Initiate neuromuscular control exercises (PNF)
- Initiate manual resistance
- Continue use of modalities, ice as needed

#### **Week 6**

- Range of motion exercises
  - Continue stretching program
- Strengthening exercises
  - Continue all strengthening exercises listed above
  - Initiate light resistance shoulder flexion
  - Initiate upper extremity endurance exercises
  - Initiate light isotonic resistance progression
  - NO shoulder press or bench press or pect deck or pullovers
  - Rhythmic stabilization exercise for shoulder flexion/extension
  - Program all shoulder and scapular strengthening exercises

### **PHASE III – DYNAMIC STRENGTHENING PHASE (Weeks 8-16)**

**Goals:** Improve strength/power/endurance  
 Improve neuromuscular control/dynamic stability to the AC joint  
 Prepare athlete for overhead motion

#### **Criteria to Enter Phase III:**

1. Full nonpainful ROM
2. No pain or tenderness
3. Strength 70% of contralateral side

#### **Strengthening Exercises:**

- Continue isotonic strengthening exercises
  - Initiate light bench press, shoulder press (progress weight slowly)
  - Continue with resistance exercises for:
    - Shoulder abduction
    - Shoulder ER/IR
    - Shoulder flexion
    - Latissimus dorsi (rowing, pull-downs)
    - Biceps/triceps
  - Initiate tubing PNF patterns
  - Initiate ER/IR at 90 degrees abduction
  - Scapular strengthening (4 directions)
  - Emphasis on scapular retractors, elevators
  - Neuromuscular control exercises for glenohumeral and scapulothoracic joints
    - Rhythmic stabilization
      - Shoulder flexion/extension
      - Shoulder ER/IR (90/90)
      - Shoulder abduction/adduction
      - PNF D<sub>2</sub> patterns
      - Scapular retract/protract
      - Scapular elev/depress
  - Program to plyometric upper extremity exercises
- Continue stretching to maintain mobility

### **PHASE IV – RETURN TO ACTIVITY PHASE (Week 16>)**

**Goals:** Progressively increase activities to prepare patient/athlete to full functional return

**Criteria to Progress to Phase IV:**

1. Full nonpainful ROM
  2. No pain or tenderness
  3. Isokinetic test that fulfills criteria (Shoulder F/E, Abd/Add)
  4. Satisfactory clinical exam
- Initiate Interval Sports Program
  - Continue all exercises listed in Phase III
  - Progress resistance exercise levels and stretching

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