Acromio-Clavicular Joint Reconstruction Rehabilitation Guidelines

The following is a detailed outline of the rehabilitation regime for patients who have had an Acromio-Clavicular Joint Reconstruction by Dr. Macgroarty.

Each case can be very different depending on the goals of the patient, the age of the patient, the size of the repair, type of repair, etc. We follow these basic guidelines. Any physician indicated precautions override these guidelines.

12-16 hours post op

If local anaesthetic block used

The block affecting your arm will begin to wear off, so it is advisable to begin taking the pain killers prescribed for you (eg. Panadeine osteo).

Day 1 to week 6

What to expect

The pain is often worse at night, especially the first few nights.

Don’t forget to use ice and your pain medication.

Some patients find it more comfortable to sleep a little more vertical, for instance a recliner.

An increase in body temperature is common following an operation.

The joint ligaments takes about 12 weeks to heal to bone. So don’t forget to wear the sling when you are up and about, and to rest your arm on a pillow or arm rest when you are sitting quietly. You should sleep in the sling for this period.

Your wound is cover by a waterproof dressing, you can shower normally.

Your first post-operative appointment should be on week 2. We will remove the dressing and review the operation with you.
Start the following exercises

Some gentle exercises are outlined below. During these exercises, there is to be NO ACTIVE MOVEMENT of the operated arm. You are to use your opposite arm to assist with movements, or allow gravity to move your body into position for exercises such as the pendulum.

- *Do each exercise the number of times recommended.*
- *All exercises should be done 3 to 5 times a day as your pain allows.*
- *Absolutely NO lifting.*
- *Avoid too much early active use.*

1. **Bend and straighten elbow**

   Use your opposite arm to assist with the movement of the affected arm initially.

   **REPEAT** 10 times

2. **Passive Shoulder Flexion**

   Place hands on top of a bench or chair at waist height.
   Step backwards, keeping the arms straight.
   Bend from the hips and lower your trunk between your arms.
   You should feel a stretch in your shoulder.
   Hold gently for 10-15 seconds.

   **REPEAT** 5 times

3. **Hand Squeeze**

   The hand squeeze exercise will improve your hand strength.
   Squeeze the fingers of your hand in towards your palm.
   Hold for 5-10 seconds, then release.
   You can use a squeeze ball if you have one available, but it is not necessary.

   **REPEAT** 10 times
4. Neck Stretch

Gently stretch your neck from side to side.
REPEAT as required

5. Passive Pendulum

Gently let the affected arm fall away from your body as you slowly bend forward from the hips.
Aim for a 90 degree angle between your body and your arm.
Hold this position for 10 seconds.
REPEAT 5 times

6. Passive External Rotation

Stand with your affected arm up against a door jamb.
Assist your elbow to bend to 90 degrees and keep your arm resting across the front of your waist (just as if it was in the sling).
Using a stick or your other hand, push your affected arm away from your body until you get a stretch.
Hold gently at this point for 5-10 seconds.
REPEAT 5 times
7. Posture

When you no longer need to wear your sling, it is important to stretch your back and shoulders to regain your pre surgery posture.
Posture is important especially for a good functioning shoulder.
Gently roll your shoulders a few times and squeeze your shoulder blades together.
Gently hold this position for 10 seconds.
**REPEAT  5 times**
Week 6 – 8

What to expect

You can stop wearing the sling 6 weeks post-op if the reconstruction was done open or 3 weeks post-op if the reconstruction was done arthroscopically.

You can book your first physiotherapist appointment.

No overhead activities

You can lift up to 1kg to your waist.

You can drive when you are able to lift your arm shoulder high (around week 8)

Rehabilitation Program

- Progressive increase in GH ROM
  - Forward elevation and scaption: increase in increments of 15° per week
- Correct asymmetric capsular tightness
- External rotation: increase in increments of 15° per week
  - Approach contralateral ER and side by 8 weeks
  - Wand exercises for ER stretches
- Begin active ROM at 6 weeks starting supine and progressing to sitting
- AAROM - Flexion and Abduction to 90 degrees (supine wand)
  - ER as tolerated
  - IR as tolerated (wand behind back)
- Isometric cuff and deltoid strengthening
- May use UBE especially in reverse for scapular strengthening
  - Increase resistance starting with minimal and progressing.
- Avoid impingement and rotator cuff referred pain throughout
- Avoid long lever movements such as classic open chain rotator cuff exercises. These include prone scaption and standing horizontal abduction, prone ER, etc.
- Avoid exercises that place moderate levels of tension on the lower trapezius. These include prone flexion or abduction raises (T’s, I’s, and Y’s) unilaterally or bilaterally

Milestones

AAROM Abduction to 90 degrees
Normal rotator cuff strength
Week 8-12

- Continue appropriate previous exercises
- AAROM - Flexion and Abduction to full range (wand, pulley, wall climb)
- AROM - Flexion and Abduction to full range, pain-free
- PROM / mobilization as needed to regain full motion
- Prone scapular retraction exercise (light weight)
- Ball on wall (arcs, alphabet)
- SAPS on hands
- Push-up plus against wall, progressing to table
- UBE forwards and backwards at low resistance
- Stairmaster
- Pool walking/running - No upper extremity (UE) resistive exercises
- Treadmill – running progression program starting in week 10

Milestones

Full AROM

30 table push-up

3 – 4 Months

- Continue appropriate previous exercises
- Push-up progression - Table to chair
- Ball toss overhead
- Fitter on hands
- Weight training with light weight

Milestones

Run 2 miles at easy pace

30 chair push-ups
4 – 6 Months

- Continue appropriate previous exercises
- Push-ups (regular)
- Sit-ups
- Swimming
- Running progression to track
- Progressive weight training program
- Transition to home/gym program

Milestones

Resume all activities

No contact sports until Dr. Macgroarty gives you the clearance.