

Acromioclavicular (AC)/ Sternoclavicular (SC) Joint Reconstruction Rehabilitation Protocol

Phase	Goals	Precautions/Restrictions	Treatment
Weeks 0-6	<ul style="list-style-type: none"> Protect surgical site Decrease pain and inflammation PRICE principles Maintain integrity of repair Maintain cardiovascular conditioning as able 	<ul style="list-style-type: none"> No lifting of any object Wear immobilizer with abduction pillow except for hygiene and exercise performance (6 weeks) No shoulder ROM 	<ul style="list-style-type: none"> Initial visit: PRO's (FOTO, QuickDASH, PSFS) Range of motion of elbow, wrist and hand. Stationary recumbent or upright bike with sling Walking with sling Lower body strengthening as able with sling
Weeks 6-12	<ul style="list-style-type: none"> Maintain integrity of repair Start ROM <ul style="list-style-type: none"> Goal of full shoulder ROM by 12 weeks post-op Improve muscle activation Improve motor and neuromuscular control 	<ul style="list-style-type: none"> Week 6: discontinue abduction pillow, wean from sling over 1-2 weeks Do not force motion No weight bearing through involved shoulder No lifting greater than 5 lbs. 	<ul style="list-style-type: none"> Avoid cross body adduction for 8 weeks Week 6: Progress PROM in all planes Week 8: AAROM to AROM as tolerated Week 8: Elliptical without using arms, week 10 add arms Week 10: Shoulder isometrics may be initiated Continue lower body strengthening
Weeks 12-16	<ul style="list-style-type: none"> Maintain integrity of repair Progress exercises Progress scapular stabilizer strengthening Full range of motion without compensation 	<ul style="list-style-type: none"> Do not force motion No weight bearing through involved shoulder 	<ul style="list-style-type: none"> Week 12: PRO's (FOTO, QuickDASH, PSFS) Advancement to isotonic exercise per tolerance in all planes Week 12: Begin muscle endurance exercise on upper body ergometer Week 12: Cycling and running permitted if no pain
Weeks 16-24	<ul style="list-style-type: none"> Address any remaining asymmetries in strength, endurance and movement patterns Initiation of power development in athletes 	<ul style="list-style-type: none"> May begin loading through shoulder and initiate push-ups and bench press Avoid aggravation of repair Continue with low impact activity 	<ul style="list-style-type: none"> Continue multiplane strength and stretching. Advance proprioception exercises Anaerobic and aerobic interval training (low impact) Week 16: Core/LE training <ul style="list-style-type: none"> Light loading through shoulder Week 20: Initiate plyometric activity Week 20: Initiate interval sports program <ul style="list-style-type: none"> Met strength and mobility goals Begin throwing program, running program, golf program Week 16: PRO's and HHD testing (per MD)
Weeks >24	<ul style="list-style-type: none"> Initiate return to sport progression Initiate plyometric exercise progression Initiate higher level impact activity 	<ul style="list-style-type: none"> Focus on form and control during exercise performance Use appropriate work rest intervals Assess tolerance to activity during, after and at 24 hours after activity No lifting greater than 50% pre op 1RM until 6 months post op 	<ul style="list-style-type: none"> Low level sport specific activity, progressing to higher demand activity Continue with anaerobic, aerobic conditioning and interval training, and core stability Stability in all planes of motion Progress plyometric activities Week 24: FOTO, QuickDASH



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This protocol is not meant to be prescriptive but a recommendation to guide the rehabilitation process.
 Each patient's progress may vary based on specifics to their injury and procedure.