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OPEN ACROMIOPLASTY and/or DISTAL CLAVICLE RESECTION REHAB PROTOCL

Last Modified: Oct 2012

Phase I (0 to 3 weeks)

- Goal: full flexion and ER by 3 weeks post-op.
- Precautions
 - No active forward elevation or abduction for 6 weeks to allow healing of deltoid insertion.
 - Sling during daytime hours for 2 weeks. Sling and swathe at night for 4 weeks.
- Active elbow motion.
- Grip strengthening exercises (putty).
- Supine passive flexion and external rotation, using cane with elbow at side.
- Pendulum and passive flexion with pulleys during first post op week.
- By first week post op, patient should perform passive FE and ER exercises at home 3-5 times per day. Make sure patient understands difference between active versus passive motion.

Phase II (3 to 6 weeks)

- Add shoulder extension and internal rotation (IR) behind the back.
- Add isometric IR and ER strengthening with elbow at side.

Phase III (after 6 weeks)

- Achieve full active range of motion.
- Add resistance strengthening for deltoid and progress with Rockwood rotator cuff exercises (strengthen only within pain-free arc of motion).
- Progress to UBE, total gym, proprioceptive exercises (rebounder, swiss ball, closed kinetic chain exercises) as shoulder strength improves.
- Gym program modification for weightlifters:
 - Avoid behind the neck lat pulldowns and military press.
 - Avoid deep bench press (stop when arms break plane of body)
- Be aware that full recovery usually requires 4-6 months.

A handwritten signature in black ink, appearing to read "J. K. Lowry", with a stylized flourish at the end.

Jason K. Lowry, MD