

# Acromioclavicular (AC) Joint Reconstruction/Repair

Jonathan M. Cooper, DO

Phone: 952-456-7617 | Fax: 952-456-7967

The surgeon may specify on the operative report or referral any specific requests or deviations that fall outside the scope of this protocol.

Phase I	Phase II	Phase III	Phase IV
(0-6 weeks) Protected Phase	(Weeks 6-10) ROM Phase	(Weeks 10-16) Strength Phase	(Weeks 16 – Return) Dynamic Activity Phase
<p><b>GOALS</b></p> <ul style="list-style-type: none"> <li>Protect surgical repair</li> <li>Decrease pain and inflammation</li> <li>Begin PT 1-2 weeks postop</li> <li>2-3 visits over first 6 weeks to monitor patient compliance</li> </ul> <p><b>PRECAUTIONS</b></p> <ul style="list-style-type: none"> <li>Protection with sling for 6 weeks</li> <li>NO arm hanging in unsupported position</li> <li>Avoid downward traction on the shoulder for 12 weeks</li> <li>NO shoulder ROM</li> </ul> <p><b>EXERCISES</b></p> <ul style="list-style-type: none"> <li>AROM: elbow, wrist, hand with elbow supported</li> <li>Gentle isometrics in neutral shoulder position</li> <li>Gentle rhythmic stabilization in neutral shoulder position</li> </ul> <p><b>CRITERIA</b> to advance...</p> <ul style="list-style-type: none"> <li>Minimal pain and tenderness</li> <li>Stable AC joint on clinical exam</li> <li>Good (grade 4/5) MMT of ER and IR</li> </ul>	<p><b>GOALS</b></p> <ul style="list-style-type: none"> <li>Wean from sling; goal to D/C sling by 8 weeks</li> <li>Reestablish full nonpainful ROM</li> <li>Limit muscular atrophy</li> <li>Normalize joint kinematics</li> <li>1-2 visits per week</li> </ul> <p><b>PRECAUTIONS</b></p> <ul style="list-style-type: none"> <li>Avoid cross-body movement for 8 weeks</li> </ul> <p><b>EXERCISES</b></p> <ul style="list-style-type: none"> <li>Begin AAROM – FLEX to tolerance, ER/IR beginning at 0 ABD and progress to 90 ABD</li> <li>Isometrics</li> <li>Progress to isotonic strengthening – high reps with no to light resistance</li> <li>Initiate neuromuscular control exercises (PNF)</li> <li>Rhythmic stabilization exercise for shoulder FLEX-EXT</li> </ul> <p><b>CRITERIA</b> to advance...</p> <ul style="list-style-type: none"> <li>Full pain free AROM</li> <li>No pain or tenderness</li> <li>Strength 60% of contralateral side</li> </ul>	<p><b>GOALS</b></p> <ul style="list-style-type: none"> <li>Improve strength &amp; endurance</li> <li>Improve neuromuscular control &amp; dynamic stability of the AC joint</li> <li>1 visit per week per therapist discretion</li> </ul> <p><b>PRECAUTIONS</b></p> <ul style="list-style-type: none"> <li>Avoid bench press and push-ups for 12 weeks</li> </ul> <p><b>EXERCISES</b></p> <ul style="list-style-type: none"> <li>Continue isotonic strengthening exercises</li> <li>Resistance exercises for shoulder ABD, ER, IR, FLEX, Latissimus dorsi, biceps, triceps</li> <li>Scapular strengthening</li> <li>Rhythmic stabilization for glenohumeral and scapulothoracic joints</li> <li>Plyometric upper extremity exercises</li> </ul> <p><b>CRITERIA</b> to advance...</p> <ul style="list-style-type: none"> <li>Full pain free AROM</li> <li>No pain or tenderness</li> <li>Adequate isokinetic strength testing of the shoulder</li> <li>Satisfactory clinical exam</li> </ul>	<p><b>GOALS</b></p> <ul style="list-style-type: none"> <li>Increase activity to prepare patient/athlete for full functional return</li> </ul> <p><b>EXERCISES</b></p> <ul style="list-style-type: none"> <li>Continue strengthening exercises from previous phase</li> <li>Progress resistive exercise to tolerance</li> <li>High level proprioceptive, strength, and stabilization</li> <li>Serratus anterior and mid-low trapezius specific scapular exercises</li> </ul> <p><b>RETURN TO Sport/Work</b></p> <ul style="list-style-type: none"> <li>Non-contact or overhead: As fitness allows</li> <li>Overhead and serving sports: Weeks 20+</li> <li>Contact sports: 6+ months</li> <li>Progression towards return to work/work hardening</li> </ul>

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Questions and updates regarding the progress of any specific patient are encouraged and should be directed to Dr. Cooper at 952-456-7617.