**DISTAL CLAVICLE EXCISION (MUMFORD PROCEDURE)**

**PT PROTOCOL**

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<th>PHASE 1</th>
<th>BRACE INSTRUCTIONS AND RESTRICTIONS</th>
<th>RANGE OF MOTION GOALS</th>
<th>PT EXERCISES/NOTES</th>
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| **First 4 Weeks (0-4)**  
1 Session/week or once every other week  
Begin after 2 weeks | - Sling x 2 weeks full time except hygiene/exercises, then part time during day x 2 weeks  
- May remove sling at night *after 2 weeks* as tolerated  
- Avoid horizontal adduction | - PROM as tolerated in all positions | - **First 2 weeks**, begin Codman's  
- **After 2 weeks**, progress posterior capsule mobilizations, closed chain scapular stabilizers |

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| **Second 4 Weeks (4-8)**  
1-2 Sessions/week | - **Out of sling**  
- Avoid horizontal adduction | - Advance to full AAROM/AROM | - Wands/pulleys  
- Wall climbs  
- Initiate scapular stabilizing exercises, core strengthening exercises  
- Begin resistive exercises for scapular stabilizers, biceps, triceps, and rotator cuff  
- Begin rotator cuff strengthening *after 6 weeks* |

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<th>PHASE 3</th>
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| **Third 4 Weeks (8-12)**  
Sessions once/week or once every other week | - | - **Full AROM in all planes** | - **Advance strength training as tolerated**  
- Begin eccentric resisted motion and closed chain activities  
- Return to sport and full activity **at 12 weeks** |

This protocol is intended for the purposes of guiding post-surgical or post-injury rehabilitation exercises and goals. These guidelines may be interpreted by a certified physical or occupation therapist and tailored to meet patient specific goals and expectations. Other specific modifications may be made by Dr. Butterfield depending on adjuvant surgical procedures, surgical findings, or rehabilitation progress.

Please fax initial physical therapy assessment and progress notes to Dr. Butterfield at 763-717-4139. You may direct questions regarding this protocol or patient progress to our office at 763-786-9543.