



GOLDEN STATE ORTHOPEDICS & SPINE

AC Joint Reconstruction

Typical procedure: **Coracoclavicular Reconstruction with Soft Tissue Auto/Allograft**

Frequency: 2 visits/week

Duration: 4 months

Phase I (Weeks 0-2): Post-Operative

Precautions (Through Week 6)

- Sling or Immobilizer: At all times except with PT or when showering.
- No shoulder ROM
- No lifting, no body weight support with hands

Exercises:

- > Begin Pendulums as tolerated
- > AROM wrist/elbow
- > Scapular "pinches"

Phase II (Weeks 3-6): Protection Phase

Precautions (Through Week 6)

- Sling or Immobilizer: At all times except with PT or when showering.

Exercises:

- > Passive supine ER to neutral and extension to neutral
- > Passive supine FF in scapular plane to 100°
- > AROM wrist/elbow, Scapular "pinches"
- Pain free submaximal deltoid isometrics

Phase III (Weeks 6-10): Intermediate/Range of Motion Phase

- Sling or Immobilizer: Discontinue at Week 6.

Exercises:

- > Passive & Active assisted FF in scapular plane - limit 140° (wand exercises, pulleys) Passive & Active assisted ER - no limits (go SLOW with ER)
- > Manual scapular side-lying stabilization exercises IR/ER submaximal,
- > Pain free isometrics and soft tissue modalities as needed

Advancement Criteria:

- FF to 160°, ER to 40°
- Normal scapulohumeral rhythm
- Minimal pain and inflammation



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Phase IV (Weeks 10-14): Early Strengthening

Exercises:

- > AAROM for full FF and ER, AAROM for IR - no limits
- > IR/ER/FF isotonic strengthening
- > Scapular and latissimus strengthening
- > Humeral head stabilization exercises
- > Begin biceps strengthening
- > Progress IR/ER to 90/90 position if required
- > General upper extremity flexibility exercises

Advancement Criteria:

- Normal scapulohumeral rhythm and full upper extremity ROM Isokinetic IR/ER strength 85% of uninvolved side
- Minimal pain and inflammation

Phase V (Weeks 14-18): Advance Strengthening/Return to Activity

Exercises:

- > Continue full upper extremity strengthening program
- > Continue upper extremity flexibility exercises
- > Activity-specific plyometrics program
- > Begin sport or activity related program
- > Address trunk and lower extremity demands
- > Begin throwing program if appropriate
 - Begin light tennis ball tossing @ 20-30ft. max, 60% velocity, work on wind-up mechanics, early and late cocking phase, acceleration, and follow through
 - Throwers begin re-entry throwing program on level surface (see interval return to throwing programs)
 - Continue strengthening and stretching programs
- > Emphasize posterior capsule stretching

Discharge Criteria:

- Isokinetic IR/ER strength equal to uninvolved side
- Independent HEP
- Independent, pain-free sport or activity specific program



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EXERCISES

Passive Supine Flexion/Forward Elevation: Lie on your back. Grasp wrist with non-op hand and passively raise operative arm overhead. Aim to get to 90° by 3 weeks. In week 4, progress to 120°. Then full ROM after 6 weeks. Keep elbow bent and relaxed. Repeat 10 reps, 2-3 times/day.



Passive Pendulum Exercise: Hold onto a chair back with non-op hand and bend forward. Let the operative arm hang down passively. Use body to passively swing arm: Forward, backward, side to side and in small circles. Repeat throughout the day as tolerated.

