**ACROMIOPLASTY WITH OR WITHOUT DISTAL CLAVICLE RESECTION PROTOCOL**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Diagnosis: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Surgery: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Frequency: 1 2 3 4 times / week Duration: 1 2 3 4 5 6 Weeks

**\_\_\_\_\_\_Days 0-7**

• Home Exercises given post-op (pendulums; ROM elbow, wrist, hand, grip strengthening)

 **\_\_\_\_\_\_Weeks 1-4:**

• D/C sling at 1-2 weeks post-op; sling when sleeping if needed

• PROM -> AAROM -> AROM as tolerated

• With distal clavicle resection, NO cross-body adduction until 8 weeks post-op (otherwise guidelines the same)

• ROM goals: 140° FF / 40° ER at side

• No abduction-rotation until 4-8 weeks post-op

• No resisted motions until 4 weeks post-op

• Heat before / ice after PT sessions

**\_\_\_\_\_\_Weeks 4-8:**

• D/C sling if not already done

• Increase AROM in all directions with passive stretching at end ranges to maintain or increase shoulder flexibility

• ROM goals: 160° FF / 60° ER at side

• Begin light isometrics with arm at side for rotator cuff and deltoid; can advance to bands as tolerated

• Physical modalities per PT discretion

**\_\_\_\_\_\_Weeks 8-12:**

• Advance strengthening as tolerated: isometrics -> bands -> weights; 10 reps/set per rotator cuff, deltoid, and scapular stabilizers

• Only do strengthening 3x/week to avoid rotator cuff tendonitis

• If ROM lacking, increase to full with passive stretching at end ranges

• Begin eccentrically resisted motions, plyometrics, and closed chain exercises

• Begin sports related rehab at 3 months, including advancing conditioning

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_