

## REHABILITATION GUIDELINES FOR ACROMIOCLAVICULAR (AC) JOINT RECONSTRUCTION

### PHASE I (0 WEEKS TO 6 WEEKS)

### DATES:

Appointments	<p>MD follow up at 2 and 6 weeks from date of surgery</p> <p>Begin physical therapy 3-5 days after surgery 1-2 x per week</p>
Rehabilitation Goals	<ul style="list-style-type: none"> <li>• Maintain integrity of the surgical repair</li> <li>• Diminish pain and inflammation</li> <li>• Prevent muscular inhibition</li> <li>• Independent with ADLs with modifications to protect repair</li> </ul>
Precautions	<ul style="list-style-type: none"> <li>• Keep wound clean and dry</li> <li>• Ice frequently or as indicated by pain and/or swelling</li> <li>• No supporting of body weight with hands</li> <li>• Sling at all times including sleep x 6 weeks (may be removed for PT exercise and showers)</li> <li>• Sling must support and lift arm underneath the elbow</li> <li>• Avoid any active abduction or forward elevation</li> <li>• <b>EXERCISES MUST BE PERFORMED <u>IN SUPINE POSITION</u>:</b> <ul style="list-style-type: none"> <li>○ Gentle passive scaption to full</li> <li>○ Gentle forward elevation to full</li> <li>○ ER with elbow <u>at the side</u> to full</li> </ul> </li> </ul>
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> <li>• <b>NO PENDULUMS OR HANGING EXERCISES</b></li> <li>• AAROM supine flexion to 90 okay</li> <li>• Table slides</li> <li>• Active scapular retraction and depression</li> <li>• Active and passive ROM to the neck, elbow, wrist, and hand 5 x day</li> </ul>
Cardiovascular Exercises	<ul style="list-style-type: none"> <li>• NA, safe walking while wearing sling okay</li> </ul>
Progression Criteria	<ul style="list-style-type: none"> <li>• Flexion and scaption to 90, ER to at least 30</li> </ul>

PHASE II (6 WEEKS TO 3 MONTHS)

DATES:

Appointments	Continue physical therapy 1-2 x week
Rehabilitation Goals	<ul style="list-style-type: none"> <li>• Work towards full pain free PROM</li> <li>• Begin AAROM and AROM</li> <li>• ROM should be full by 3 months, if not, contact MD</li> </ul>
Precautions	<ul style="list-style-type: none"> <li>• Sling may be discontinued at 6 weeks</li> <li>• No significant distracting force pulling the arm down toward the floor (if standing) or compressive force across the AC joint (if doing something like a bench press/push up).</li> <li>• Recommend band resistance to avoid carrying weights and distractive/compressive forces to the AC joint.</li> </ul>
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> <li>• PROM, AAROM, AROM exercises</li> <li>• Exercises may now be done in standing or seated</li> <li>• Start with isometric shoulder strengthening, and progress RC strength over time recommending band vs dumbbell resistance</li> <li>• Periscapular strengthening including serratus press and scapular retraction/depression, recommend band resistance</li> </ul>
Cardiovascular Exercises	<ul style="list-style-type: none"> <li>• UBE, beginning with AAROM progressing to resistance as tolerated</li> <li>• Walking</li> </ul>
Progression Criteria	<ul style="list-style-type: none"> <li>• Full ROM without compensation</li> </ul>

PHASE III (3 TO 6 MONTHS)

DATES:

Appointments	Continue physical therapy 1-2 x week
Rehabilitation Goals	<ul style="list-style-type: none"> <li>• Full ROM</li> <li>• Progressing strength and function</li> </ul>
Precautions	<ul style="list-style-type: none"> <li>• Check with your MD on when you are cleared for weight bearing exercises and riding a bike</li> </ul>
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> <li>• Active shoulder and periscapular muscle strengthening exercises are the focus of this period with emphasis on regaining full strength</li> </ul>

	<ul style="list-style-type: none"> <li>Strengthening exercises should be high rep, low weights with dumbbells and bands</li> <li>Avoid wide grip bench press or behind the neck military press</li> </ul>
Cardiovascular Exercises	<ul style="list-style-type: none"> <li>As tolerated</li> </ul>
Progression Criteria	<ul style="list-style-type: none"> <li>Full ROM without compensatory movements</li> </ul>

#### PHASE IV (6 TO 9 MONTHS)

DATES:

Appointments	3-5 x week for home program, may need physical therapy supervision for functional training
Rehabilitation Goals	<ul style="list-style-type: none"> <li>No compensatory movements present</li> <li>Rehab geared toward return to sport or work</li> </ul>
Precautions	<ul style="list-style-type: none"> <li>Gradual return to previous sports/activities/work duties under controlled conditions</li> </ul>
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> <li>Advanced strengthening with weights, dumbbells, and bands to include muscles of the shoulder girdle, rotator cuff, and periscapular areas</li> <li>Low repetitions and high weights should be avoided indefinitely</li> <li>May begin functional training exercises including swimming, tennis, or an interval throwing program (if a thrower)</li> </ul>
Cardiovascular Exercises	<ul style="list-style-type: none"> <li>As tolerated</li> </ul>
Progression Criteria	<ul style="list-style-type: none"> <li>Full return to sports/activities/full work duties are pending MD approval based upon: <ul style="list-style-type: none"> <li>Full functional ROM</li> <li>No pain or tenderness</li> <li>Symmetric muscular strength</li> </ul> </li> </ul>

References: Dr. Tim Crall's previous AC reconstruction protocol

PT name and date: Lance Georgeson, PT 9/2025

MD name and date: Dr. Timothy Crall 9/2025

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