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## **REHAB PROTOCOL: AC JOINT DISLOCATION**

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

**Date:** \_\_\_\_\_

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

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

### **PLAN**

- Restoring stability to the AC joint through strength training of the supporting muscles of the shoulder girdle is the primary focus of rehabilitation
- Early intervention is directed toward reducing pain and inflammation to allow strength based exercise to begin as soon as possible

### **Phase I: First 2 wks post-injury**

- Sling for period of two weeks
- Pain control: Outpatient pain medication, mobilization and modalities (ice, heat, ultrasound, etc)
- Discontinue sling if the patient is no longer having pain with the UE at the side during ADL's

### **Exercise**

- Pendulums
- Closed chain shoulder and scapular AAROM (table slides, pulleys, scapular protraction and retraction on wall, scapular clock, exercises with wand etc.).
- Limit internal rotation behind the back, cross body adduction, and end range forward elevation as they involve motion at the AC joint, which can be painful
- Shoulder isometrics (submaximal, non painful)
- Lower extremity and core exercises focusing on kinetic chain strength and control

### **Phase II: Weeks 2-6**

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Tel: 212-737-3301 Fax: 212-734-0407

- Discontinue Sling
- Pain control: Outpatient pain medication, and modalities – ice, heat, ultrasound, etc

### **Exercise**

- Establish scapular control and rhythm (emphasizing scapular retraction to stabilize the AC joint)
- Shoulder and scapular AAROM progressing to AROM (progressive forward elevation to the wall, Pulleys FE, reclined active flexion progressing to upright, horizontal abduction with external rotation and prone horizontal extension)
- When there is good stability of scapula, strengthening exercises focus on the deltoid, trapezius, and rotator cuff (start with isometrics and theraband resistive exercises)
- Kinetic chain exercises (lawn mower, disco motion)

### **Precautions**

- Avoid shoulder press, bench press, pullovers, and pectoralis flys

### **Phase III: Weeks 6-12 (Strengthening phase)**

#### **Prerequisite:**

- Pain free non-athletic ADLs
- Full active ROM without pain

### **Exercises**

- Isotonic exercises of shoulder and scapular muscles with continued emphasis on maintaining scapula retraction
  - Targets: Rotator cuff, Deltoid, Serratus anterior, Latissimus dorsi, Trapezius, scapular rotators, biceps, pectoralis major
  - Elastic resistance with tubing, Blackburn “Ts” and “Ys”
- PNF patterns with tubing
- Introduce plyometrics, rhythmic stabilization in supine position, and neuromuscular dynamic stability exercises
- Continued Kinetic chain exercise

### **Phase IV: 12 Weeks Beyond (Advanced strengthening phase)**

#### **Prerequisite:**

- Overhead and reaching activity without pain
- Able to bear weight through involved upper extremity without pain



## **Exercises**

- Plyometric exercise (chest pass with medicine ball, etc.)
- Continued kinetic chain exercise
- Start sport specific training and drills
- Weight exercises in the gym (push ups, bench press- start slowly and advance gradually)

## **Criteria for return to sports participation:**

- Full active range of motion without scapular dyskinesis
- Full shoulder strength with manual muscle testing
- Pain free overhead activities
- Pain free sport specific motions and maneuvers

## **Modalities**

- ◇ Heat and Ice
- ◇ Ultrasound
- ◇ Iontophoresis
- ◇ Phonophoresis
- ◇ Therapists' discretion
- ◇ TENS
- ◇ Trigger point massage

## **Evaluations and Other**

- ◇ Teach home exercise program
- ◇ Functional capacity evaluation
- ◇ Work Hardening/Work Conditioning

## **Comments:**

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**Frequency:** \_\_\_\_\_ **times per week**

**Duration:** \_\_\_\_\_ **weeks**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_