

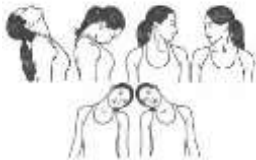
Patient Name: _____

Date of Surgery: _____

Shoulder ACJ Reconstruction

You will be required to wear a sling for 6-8 weeks depending on the extent of your surgery, this will be explained to you by your surgeon/physiotherapist. During this period it is important to maintain mobility of the surrounding joints to prevent stiffness. You should avoid any shoulder movement during these first 4 weeks. The following exercises should be carried out 3-4 times daily. It is advised to commence physiotherapy after your 4 week review appointment with Professor Moran.

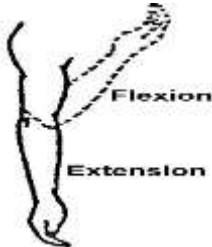
1. Neck Range of Movement



Turn your head to one side, then the other. Repeat 10-15 times Tilt your head towards one shoulder, then the other.

Repeat 10-15 times.

2. Elbow Range of Movement



Take your arm out of the sling. Keep your arm by your side. Straighten your elbow fully and bend it fully.

Repeat 10-15 times.

3. Wrist Range of Movement



Move your wrist up and down. Rotate it in circles, clockwise and anti-clockwise.

Repeat 10-15 times.

4. Shoulder Blade Exercise



Keep your arms relaxed. Square your shoulder blades (pull them back and slightly down). Do not let your back arch. Do not let your elbows move backward. Hold for 10seconds.

Repeat 10-15 times.

Physiotherapy Rehabilitation Guidelines: Shoulder ACJ Reconstruction

Phase	Mobilisation	ROM	Exercises / Strengthening	Precautions
Phase 1 Week 0-4	Immobiliser at all times	No shoulder ROM (active / passive)	AROM to wrist / AROM to elbow / Scapula Retractions / Postural Alignment	No active or passive ROM to the shoulder
Phase 2 Week 4-6	Immobiliser at all times	Begin Passive ROM	Passive supine ExtRotn to neutral / Passive supine Extension to neutral / Passive FwdFlexion in scapular plane to 100° / Pendular Exercises / AROM to wrist / elbow / Deltoid isometrics (painfree, submaximal range) / Scapula Retractions / Postural Alignment / IntRotn / ExtRotn Isometrics	No active ROM to the shoulder
Phase 3 Week 6+	May wean out of immobiliser	Begin gentle AROM & AAROM excs	PROM / AAROM FwdFlex in scapular plane (limit 140°) / PROM / AAROM ExtRotn / Gentle AROM excs / Scapular stabilization / Gentle Theraband excs / Standing rows / Proprioceptive excs (gym ball) / Manual mobilisation	Isometrics in painfree, submaximal range) Restrict horizontal abduction and adduction of the shoulder.
Phase 4 Week 10+	No immobiliser	Aim for full AROM / AAROM	IntRotn / ExtRotn / FwdFlexn isotonic strengthening / Humeral head stabilization / Scapular stabilization / Latissimus strengthening / Wall push ups / Shoulder Press / Lat Pull Downs / Upper Limb Flexibility / Pool therapy / Posterior capsule stretching / Address kinetic chain / trunk / lower extremity Progression of upper extremity strengthening / flexibility / Bench press / Activity specific plyometrics / Overhead / throwing programme	Full pain free ROM Normal scapulo-humeral rhythm Emphasis on exercise technique

Note: As everyone progresses at different rates, the rehabilitation programme should focus on criteria based progression, rather than timeline based progression. For each exercise, it is imperative to have consistent sequential progressions. Once the patient / athlete is proficient with execution of a particular exercise, the exercise can be increased in complexity, with emphasis on technique efficiency.

Please contact rehab@cathaljmoran.com if you have any queries.