

# Acromioclavicular Joint Repair Protocol

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## Phase I (Post-op until week 8) Protective Phase

- Sling immobilization for the first 6 weeks; removed only for hygiene and prescribed exercises
- All early exercises to be performed supine or with gravity eliminated
- Gentle passive range of motion as tolerated, avoiding horizontal adduction past neutral
- Initiate elbow, wrist, and hand range of motion
- Begin shoulder isometric exercises
- Closed-chain scapular stabilization exercises performed supine or with gravity eliminated
- Initiate gentle deltoid and rotator cuff activation in protected positions
- Control pain and inflammation

## Phase II (Weeks 8–16) Progressive Motion and Strengthening Phase

- Discontinue sling use unless otherwise directed
- Achieve full ROM passively by 8-10 weeks
- Begin active and active-assisted range of motion as tolerated, initially in prone positions
- Progress Phase I exercises
- Initiate active-assisted strengthening through available ROM
- Begin vertical-positioned strengthening at approximately 12 weeks
- Continue scapular stabilization and rotator cuff strengthening
- Maintain cardiovascular conditioning with walking or stationary bike

## Phase III (Weeks 16–24) Advanced Strengthening and Return to Activity

- Progress to full active range of motion in all planes
- Advance strengthening as tolerated
- Continue progression of Phase I and II exercises
- Initiate sport-specific or work-specific exercises after approximately 20 weeks once cleared by physician
- Progress functional activities with focus on scapular control and endurance

**\*\*Progression Criteria:\*\*** Advancement through phases is criteria-based and dependent on pain control, restoration of motion, strength, scapulothoracic control, neuromuscular coordination, and patient compliance. Return to sport or heavy activity is surgeon-directed.