



REHABILITATION GUIDELINES

DISTAL CLAVICLE EXCISION

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The intent of this protocol is to provide the therapist with guidelines of the post-operative rehabilitation course after an arthroscopic surgery. It should not be a substitute for one's clinical decision making regarding the progression of a patient's post-operative course based on their physical exam findings, individual progress, and/or the presence of post-operative complications. The therapist should consult the referring physician with any questions or concerns.

INDIVIDUAL CONSIDERATIONS:

PHASE I – ACUTE PHASE (1-6 weeks)

Goals:

- Limit pain (relative rest – avoid pain provoking positions and movements)
- Reduce swelling
- Restore motion

Treatment Recommendations:

- Ice
- Sling (if necessary)
- E-Stim
- Gentle mobilization (Grade I, Grade II)
- Pendulum exercises
- ROM (passive and active assisted – pain free)
- Non-steroidal anti-inflammatory medication

Precaution:

- Relative rest is important – reduce inflammation



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PHASE II – SUBACUTE PHASE (6-12 weeks)

Goals:

- Eliminate pain
- Restore full active motion
- Restore good glenohumeral and scapulohumeral rhythm
- 4/5 strength of upper extremity muscles including scapular muscles

Treatment Recommendations:

- Continue to use modalities as needed
- Start with active range-of-motion through the available range
- Add isometrics below shoulder level
- Flexibility of the cervical, shoulder and scapular muscles
- Non-involved upper extremity and bilateral lower extremity exercises

Precautions:

- All active and isometric exercises should be muscle specific
- All movements and activity increasing symptoms should be eliminated
- Isometrics are to be modified (position change) if patient's symptoms are made worse

PHASE III – STRENGTHENING PHASE (>10weeks)

Goals:

- Attain full pain free range-of-motion
- Achieve 5/5 strength in all shoulder girdle muscles, including distal extremity muscles
- Full pain free resistive range-of-motion
- Negative Neer and Hawkins sign
- Perfect symmetrical scapulohumeral rhythm

Treatment Recommendations:

- Continue with previous exercises
- Progress resistance to overhead and above horizontal
- Add resistance to scapular exercises
- Work on quality of motion, not just resistive training
- Work on balance of the rotator cuff muscles
- Start sport specific/work specific exercises
- Water resistive activities