

### **Subacromial Decompression/Distal Clavicle Excision Rehabilitation Protocol**

The following are guidelines for the post-operative rehabilitation of an individual who had underwent a subacromial decompression and/or a distal clavicle excision. This schedule will vary from patient to patient based on individual tolerance. This guideline is intended to be administered by a licensed physical therapist and/or certified athletic trainer. If there are any questions concerning the rehabilitation, please don't hesitate to call our office.

#### **MAJOR OBJECTIVES:**

- Full range of motion by 6 weeks post-op.
- Adequate control/strength of shoulder girdle to return to activity by 12-16 weeks post-op.
- Progress the patient's activity as tolerated by pain and inflammation.
- ALWAYS stabilize the scapula when performing strength exercises.
- ALWAYS have the patient perform 3-5 home exercises based on their most current needs to assist their recovery.

#### **Phase 1**

##### 0-2 weeks

- Use of sling for comfort only
- Modalities as needed to decrease pain and inflammation
- Scapular mobilization
- Active scapulothoracic exercises as tolerated
- AROM of cervical spine, elbow, wrist and hand
- Supine PROM as soon as tolerated for:
  - Elevation
  - ER/IR in scapular plane with arm in slight abduction
  - No abduction or 90/90 ER until 4-8 weeks post-op

##### 2-4 weeks

- Discontinue use of sling
- Above program as needed
- AAROM for elevation and ER/IR with pulleys, cane or towel
- PROM for posterior capsular stretch
- Active scapulothoracic exercises as tolerated
- No resistive motions
- ROM goals: 140° forward flexion, 40° ER and IR behind back

## **Phase 2**

4-8 weeks

- Increase ROM as tolerated
- Begin light isometrics for rotator cuff (sub-max to max resistance)
- Begin light isometrics for deltoid (sub-max to max resistance)
- Advance to therabands as tolerated
- Passive stretching at end ranges to maintain flexibility
- ROM goals: 160° forward flexion, 60° ER at side, IR with gentle posterior capsule stretching behind back and at 90° of abduction

## **Phase 3**

8-12 weeks

- Progress to full motion without discomfort
- Advance strengthening, control and endurance as tolerated for periscapular, rotator cuff and other shoulder girdle musculature
- Begin eccentrically resisted motions and closed-chain activities
- Proprioception program as needed
- Sport-specific and work activities as needed

**\*If a distal clavicle excision is performed, horizontal adduction is restricted for 8 weeks post-op\***