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Acromioclavicular Joint reconstruction

For Patients who had Anatomical Reconstruction of the Conoid and Trapezoid ligaments using LARS Ligament, Coracoacromial Ligament transfer to reconstruct the Superior ACJ ligament, Reconstruction of the DT Fascia and Distal clavicle excision or one of these variants.

Physiotherapy
Post-op
Day 1 - 3 weeks
Level 1 Exercises
    Sling for 6 weeks in total.
    Teach axillary hygiene
    Teach postural awareness and scapular setting
    Core stability exercises as appropriate)
    Proprioceptive exercises (minimal weightbearing below 90 degrees)
    Active assisted flexion as comfortable
    Active assisted external rotation as comfortable
    Do not force or stretch

3 - 6 weeks
Level 2-3 exercises   Progress active assisted to active ROM as comfortable
    Do not force or stretch

6 - 12 Weeks
Progress Level 3+ exercises   Regain scapula & glenohumeral stability working for shoulder joint control rather than range
    Gradually increase ROM

Strengthen

Increase proprioception through open & closed chain exercise

Progress core stability exercises

Incorporate sports-specific rehabilitation

Plyometrics and pertubation training

Milestones

Week 6

Active elevation to pre-op level

Week 12

Minimum 80% range of external rotation compared to asymptomatic side

Normal movement patterns throughout the range

Failure to achieve milestone referral to Prof Imam

Return to functional activities: Return to work 3 months if a manual job. Driving:6-8 weeks

Discharge and Rehabilitation

Immobilisation: Polysling 6 weeks

Rehab: See Above

Discharge: Today or tomorrow once mobile and safe and physiotherapists are happy.

Review at 2 weeks, XROA 6 weeks.