Distal Clavicle Resection Therapy Protocol

DR. EASTWOOD

The rehabilitation program following a distal clavicle resection is divided into three phases. Phase I is the first week postoperative and consists mainly of rest, ice and restricted activity. Phase II consisted of three weeks of shoulder ROM exercises and cautious return to activities. Phase III consists of shoulder ROM exercises as needed, resistive strengthening and return to full sport and work activities. The main emphasis following this surgery is to educate and caution the patient from aggravating his or her shoulder by becoming too active too quickly.

POSTOPERATIVE PHASE I:
(0-7 Days)

CLINICAL GOALS

- Initial healing with minimal irritation of surgical shoulder
- Pain-free sleep

TESTING

- None

EXERCISES

- This initial phase does not incorporate any exercises. The patient should rest the involved shoulder, using a sling as needed and should ice the shoulder regularly to prevent pain and swelling.

CLINICAL FOLLOW-UP

- The patient will see the physician and the therapist after approximately one week. At this time sutures will be removed and a rehabilitation exercise program will be initiated.

If you have any problems or questions, please call your doctor's office (8am-5pm).

Answering service for after hours.

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POSTOPERATIVE PHASE II:
(1-4 Weeks)

CLINICAL GOALS

- Full passive and active range of motion
- Pain-free ADLs and light job duties

TESTING

- Bilateral ROM

EXERCISES

- Ice to prevent pain and swelling
- Passive, active-assisted and/or active ROM exercises are initiated depending on the patient's tolerance
- Exercises may be performed in all planes of motion
- Wand or doorway exercises can be used to work on flexion, abduction, external rotation in neutral as well as at 90˚ of abduction as tolerated. Internal rotation can be worked on close to the body with the towel stretch behind the back.

CLINICAL FOLLOW-UP

- The patient will follow up as needed per the discretion of the therapist for home exercises program update
- The patient will return to see both the physician and the therapist at one month postoperative

POSTOPERATIVE PHASE III:
(4 Weeks+)

CLINICAL GOALS

- Full active and passive ROM
- Normal strength
- Full pain-free ADLs including work, sports and lifting activities

TESTING

- Bilateral ROM
- Manual muscle testing of shoulder strength for flexion, abduction and extension using a handheld dynamometer

EXERCISES

- ROM exercises are continued/advanced as indicated
- Strengthening exercises are implemented using TheraBand® tube or light dumbbells
- The patient will begin with internal and external rotation in a neutral position and flexion and abduction at or below 90˚ of elevation
- Light dumbbells and/or TheraBand® tube exercises may be progressed above 90˚ of elevation if indicated by the patient's desired activity level. Exercises should be progressed as tolerated.

CLINICAL FOLLOW-UP

- A sport-specific functional progression may be implemented at approximately 2 months postoperatively. Athletes performing repetitive overhead motions may expect to be progressed back and return to sport at a slower rate, approximately 2-4 months postoperative. These include throwers, swimmers, divers and tennis and volleyball players.
- Weight room activities will be phased in at this time depending on patient's tolerance. Lifts, such as bench press, that put an extreme load on the AC joint will be some of the last exercises to be added and may take up to 4 months before resuming their previous level of performance.

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