

## **Δρ. Χρήστος Κ. Γιαννακόπουλος** Ορθοπαιδικός Χειρουργός, Διδάκτωρ Πανεπιστημίου Αθηνών

Πύργος Αθηνών, Κτίριο Γ΄, 2<sup>ος</sup> όροφος, Λεωφ. Μεσογείων 2–4, Αθήνα 115 27 **Τηλ.: 210 7712792** Κινητό: 697 20 999 11 **E-mail: cky@orthosurgery.gr** 

# AC Joint Rehab Protocol (Types I to III)

### Phase One

• Decrease pain.

• Active assisted ROM to include elevation and depression of the arm in the plane of the scapula.

- Do not go beyond the limit where the pain begins
- Modalities
- Isometric flexion/extension.
- Criteria to advance to Phase 2
- o 75% of FROM compared to opposite shoulder
- o Minimal pain on palpation of the AC joint
- o MMT of 4/5 of the deltoid

### Phase Two

- Advance patient to full painless ROM and increase strength in an isotonic arc.
- Active assisted ROM with arm at the side and at 90deg of abduction.
- Deltoid, trapezius, and cuff strengthening.
- Avoid bench press
- Criteria to advance to Phase 3
- o Painless ROM
- o Pain free palpation of the AC joint
- o 75% strength of the opposite shoulder.

### Phase Three

- Increase strength of the entire shoulder complex musculature
- Isotonic dumbbell shoulder flexion, abduction, shrugs, and bench press
- Progress to Plyometric drills of the upper extremity
- Criteria to advance to Phase 4
- o FROM
- o No pain
- o Satisfactory clinical exam

o Near 100% isokinetic strength compared to the opposite shoulder (testing done

at 180degrees per second and 300deg/sec).

### Phase Four

• Sport specific exercises