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Rehabilitation Protocol: Arthroscopic Subacromial Decompression/ **Distal Clavicle Excision**

Name:	Date:
Diagnosis:	Date of Surgery:
Phase I (Weeks 0-4) • Sling immobilization for comfort Weeks 0-2 - Di • Range of Motion -PROM → AAROM → AROM as t ○ Goals: 140° of Forward Flexion, 40° of Exgentle posterior capsular stretching ○ No abduction-external or internal rotatio • Therapeutic Exercise ○ Codman's/Pulleys/Cane ○ Elbow/Wrist/Hand Range of Motion ○ Grip Strengthening ○ No resistive exercises • Heat/Ice before and after PT sessions	olerated kternal Rotation at side, Internal Rotation behind back with
	le for rotator cuff and deltoid
Phase III (Weeks 8-12) • Range of Motion – Progress to full AROM without • Therapeutic Exercise – Advance strengthening as ○ Isometrics → therabands → weights ○ Begin eccentrically resisted motions, clos ○ 8-12 repetitions/2-3 sets for Rotator Cuff • Modalities per PT discretion	s tolerated sed chain exercises and plyometrics
Comments:	
Frequency: times per week Du	uration: weeks
Signature:	Date: