



Cascade Orthopaedic Group
Sports Medicine, Joint Replacement, Fracture Care and Hand Surgery

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Orthopedic Specialists

Patrick A. Dawson, M.D.

Sports Medicine, Fracture Care
and Knee Replacement

AC Reconstruction

Cryo Cuff/ icing as much as possible over the first 2-3 weeks.

Sling is used for 4 weeks.

Isometric internal and external rotation exercises in standing are started.

Immediate range of motion exercises with pendulum.

A nerf ball or hand strengthening ball is used to strengthen the grip and forearm muscles.

All of the exercises are performed 2-3 times per day for the next two weeks.

1 week

Active internal and external rotation exercises are started. The exercises are begun in standing and progressed to side lying as pain and range of motion permit.

Jessica A. Wood Gibson

Practice Administrator

4 weeks

The shoulder exercises performed are flexion to 90 degrees, abduction to 90 degrees, bent over extension, bent over horizontal abduction, and side lying external rotation.

The patient performs 3 sets of 10-15 repetitions with 2 pounds for the first four exercises. The patient is allowed to increase the weight when able to perform 3 sets of 15 repetitions.

Side lying external rotation is started at 2 pounds and the weight is increased in 1 pound increments as the patient is able to perform 3 sets of 25 repetitions.

The primary emphasis of this phase is to concentrate on the rotator cuff endurance without compromising the AC joint. These exercises are done on a 5 times per week basis for two weeks.

American Board of
Orthopaedic Surgery

American Academy of
Orthopaedic Surgery

<http://cascadeorthopaedicgroup.com>

8 weeks

Range of motion of flexion and abduction are increased to 180 degrees as tolerated by the patient. The patient continues to increase the weight to 5 pounds as he is able to complete 3 sets of 15 with each exercise. A maximum of 5 pounds is used for any of these exercises.

Additionally a scapular strengthening program is started with 3 sets of 10-15 repetitions using the SPORT Cord system.

1. Seated rowing with the resistance from overhead. The patient is instructed to pull down and back to the belt line.
2. Seated middle rowing with the resistance at the chest level. The patient is instructed to pull straight into the chest at a level below the nipple line.
3. Standing rowing with the resistance from below. The patient is instructed to pull the cord under the chin but not to allow the upper arms to abduct more than 90 degrees.
4. Standing punch for the serratus anterior. The patient is instructed to put the cord at shoulder level. A straddled stance with the arm extended at the shoulder level perpendicular to the trunk is used. With the elbow extended the patient thrusts the arm forward while keeping the trunk still and not bending the elbow.