

## REHAB PROTOCOL FOR ASAD WITH OR WITHOUT AC JOINT EXCISION

TIME POST OP	REHAB GUIDELINES	GOALS / ADVICE
Day 1 Day surgery Unit	Active assisted exercises Elbow, wrist and hand exercises Scapula exercises Postural correction No restriction in active ROM	<u>Sling</u> - for comfort – discard ASAP <u>Physio OP</u> appointment within 2-3 weeks if doing well immediate post op. Within 7 days if struggling <u>Driving</u> after 1-3 weeks if comfortable and safe <u>Sedentary work</u> – 1-2 weeks or sooner as comfortable <u>Light manual work</u> – 4-6 weeks <u>Heavy work</u> – 8-12 weeks <b>Avoid sustained repetitive overhead activities for 3/12</b>
0-2 weeks 1 <sup>st</sup> Physio review	Check ROM Isometric rotator cuff exercises Posture correction if required Scapular stabilisation exercises Continue Physio if poor ROM	Return to work (see above for timescales)
<b>2 – 6 weeks</b>	Continue ROM exercises Start through range strengthening exercises	Full ROM
<b>6 – 8 weeks</b>	Continue ROM exercises Increase strengthening exercises Sports / work training if required Discharge when full ROM	
12+ weeks	Check ROM and pain levels	
<b>Complications</b>	Failure to completely decompress, persisting pain beyond 12 months – exclude ACJ, unrepaired Rotator cuff, further impingement possibly due to stiff thoracic spine and poor posture and scapula control. Post surgical stiff shoulder. Infection – rare. ACJ excision - Acromial - Clavicular instability Opsteophytes / fusion / regrowth Excessive/insufficient resection	
<b>Final goals</b>	Full ROM by 4 weeks 75-80% improvement in pain by 12 weeks Pain free by 6-9 months Return to work If combined with ACJ excision may progress slower.	<u>Outcome measure</u> – Oxford Shoulder Score.

### ABOUT MR GEORGE-MALAL

Mr Joby George-Malal is an experienced Consultant Orthopaedic Surgeon with special interest, training and expertise in upper limb (shoulder/ elbow/ hand) problems.

### CLINICS

SPIRE HARPENDEN HOSPITAL, HARPENDEN  
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### CONTACT

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