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**Acromioplasty/Subacromial Decompression**  
**Post-Operative Protocol**

**Stage 0**

1. Modalities- pain, inflammation, and joint stiffness
2. Possible sling wear for comfort specified by physician  
-Eliminate as tolerated (2-3 days)
3. Postural awareness
4. Check Op note for possible additional pathology
  - a. Debridement of RTC
  - b. Calcific Ossifications/Tendonitis
  - c. Distal Clavicle Resection (No Horizontal Adduction)
  - d. Manipulation

**Stage 1 (Week 1)**

1. Normalize PROM, Flex and Abd to tolerance
2. Initiate AAROM and AROM pain free
3. GH joint mobilization (Inferior for increased Abd, anterior for increased ER, and posterior for IR primarily –grade 1/2)
4. AAROM to tolerance
  - a. Pulleys
  - b. Cane exercises: Flex/Ext, Horizontal Abd/Add, and ER/IR (start at 0 degrees abd)
  - c. Pendulum exercises (with or without wt.)
5. AROM pain-free
  - a. IR/ER at side (use t-band or weight-isotonics)
6. Sidelying Scapular Facilitation (clocks for control)
7. Wrist and Elbow PRE's
8. Continue Modalities (reduce inflammation and pain)

*Goals:*

Full AAROM  
Pain-free AAROM  
Minimize muscle loss atrophy  
Decrease pain and inflammation

**Stage 2 (week 2-4)**

1. PROM continued as needed to WNL (terminal ranges as needed)
2. Continue joint mob's PRN until PROM normal

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3. Continue AAROM
4. Progressing to supine AROM as tolerated pain-free and gentle Posterior IR- 4 weeks
5. Initiate Closed Kinetic Chain exercises
  - a. Horizontal (table or counter wash)
  - b. Vertical (wall wash)
  - c. Diagonal patterns (done last when tolerable)
  - d. 4 pt wt. weight shift
6. Initiate UBE 3 weeks
7. Initiate trunk exercises
8. Continue wrist and elbow PRE's
9. Continue modalities as necessary

*Goals:*

Full pain-free AROM  
Decrease pain and inflammation  
Progress strengthening

**Stage 3 (week 4-8)**

1. Progress AROM
  - a. Prone clock (ext, abd, and flex-progress wt. as able)
  - b. 6 weeks Initiate FE to 70 degrees light wt. **ONLY PERFORM WHEN PAIN-FREE**
  - c. Progress to rockwood theraband
2. Progress scapular stabilization ex's
  - a. Increase on arm in 4 pt
  - b. Arm on wall move feet further out
  - c. Lower arm to table height move feet further out
3. Initiate PNF Rhythmic stabilization-manual resistance exercises
4. Progress isotonic's
5. Continue joint mobs PRN
6. Posterior capsule stretch PRN
7. Proprioceptive and manual control drills (body blade)
8. Instruct in postural exercises (pec major and minor stretching)

*Goals:*

Increase muscular strength  
Min-0/10 pain  
Improve neuromuscular and proprioceptive control

**Stage 4 (8-10/12 weeks)**

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1. Initiate 90/90 abduction and ER to tolerance
2. Initiate isokinetic training as needed
3. Eccentric cuff and scapular exercise as needed
4. UE plyometric drills-physioball walkout, step-up push up, and Stairmaster with UE
5. Chest press, push-ups, serratus push-ups in protected ROM
6. Diagonal patterns with LE reaches (Lunging PNF patterns w/ band or weighted ball)
7. Focus on UE endurance
8. Initiate sport specific and functional activities/exercises
  - a. Overhead sport drills at 12-14 weeks per approval of physician
9. Advance HMP

DC goals

1. 0-3/10 pain scale
2. Min-to-0 palpable tenderness on clinical exam
3. AROM WNL
4. Able to perform overhead ADL's

Rev date: 9/2004