

Post-Operative Instructions **Sternoclavicular Joint Reconstruction**

Day of Surgery

- A. Relax. Diet as tolerated.
- B. Icing is important for the first 5-7 days post-op. While the post-op dressing is in place, icing should be done continuously. Once the dressing is removed on the first or second day, ice is applied for 20-minute periods 3-4 times per day. Care must be taken with icing to avoid frostbite.

You will be contacted by East Coast Orthotics regarding an ice compression unit to be used after surgery. This helps with pain and swelling but typically is not covered by insurance. The cost is \$200-300 for a 2-week rental. Alternatively, ice gel packs with a shoulder or knee sleeve can be provided by the hospital for a minimal charge.

- C. Pain medication as needed every 6 hours (refer to pain medication sheet)

First Post-Operative Day

- A. Continue ice pack every one to two hours while awake and pain meds as needed or cryocuff or gameready. Ice cuff as per instructions.

Second Post-Operative Day

- A. Continue ice pack up to post op day 2-5 and utilize after physical therapy sessions.

Third Post-Operative Day

- A. You may remove surgical bandage and shower this evening. Apply 4x4 (or similar size) waterproof bandage to these wounds prior to showering and when showering is complete apply fresh waterproof bandage. You will need to follow this routine for 2 weeks after surgery.

Physical Therapy

- A. Physical Therapy should begin at 6 weeks. Please call your preferred facility to make an appointment.

**Note: Your shoulder will be very swollen. It may take a week or longer for this to go away. It is also common to notice burning around the shoulder as the swelling resolves. If excessive bleeding occurs, please notify Dr. Jazrawi.*

Call our office @ 646-501-7223 option 4, option 2 to confirm your first postoperative visit, which is usually about 1-2 weeks after surgery. If you are experiencing any problems, please call our office or contact us via the internet at www.newyorkortho.com.

Rehabilitation Protocol: Sternoclavicular (SC) Joint Reconstruction

Name: _____ Date: _____

Diagnosis: _____ Date of Surgery: _____

- Phase I (Weeks 0-6)**
- Sling to be **worn at all times** except for showering; avoid unsupported arm; no lifting >5 lbs.
 - Range of Motion
 - **0-6 weeks:** No shoulder range of motion
 - Therapeutic Exercise
 - Elbow/wrist/hand range of motion and grip strengthening
 - Modalities per PT discretion to decrease swelling/pain

- Phase II (Weeks 6-8)**
- Continue sling except for showering and PT; avoid unsupported arm; no lifting >5 lbs.
 - Range of Motion
 - **6-8 weeks: PROM** →→ FF to 90°, Abduction to 60°, ER to neutral, extension to neutral, IR to chest wall.
 - Therapeutic Exercise
 - Submaximal pain-free deltoid isometrics
 - Elbow/wrist/hand range of motion and grip strengthening

- Phase III (Weeks 8-12)**
- No lifting >5 lbs
 - Range of Motion
 - **8-10 weeks: AAROM** →→ FF to 120°, Abduction to 90°, ER to neutral, extension to neutral, IR to chest wall.
 - **10-12 weeks: AAROM/AROM** →→ FF to 140°, Abduction to 120°, ER/IR to 45 with arm abducted.
 - **> 12 weeks: AAROM/AROM** →→ Advance to full AROM in all planes.
 - Therapeutic Exercise
 - Begin pain-free isometric rotator cuff and deltoid exercises at **8 weeks**
 - Begin gentle rotator cuff and scapular stabilizer strengthening at **10 weeks**
 - Continue elbow/wrist/hand range of motion and grip strengthening

- Phase IV (Months 4-6)**
- Range of Motion – Full without discomfort; no lifting restrictions
 - Therapeutic Exercise – Advance strengthening as tolerated: isometrics ☺☺ therabands ☺☺ light weights
 - Scapular and latisimus strengthening
 - Humeral head stabilization exercises
 - Rotator cuff, deltoid and biceps strengthening
 - Modalities per PT discretion

Comments:

Frequency: _____ times per week

Duration: _____ weeks

Signature: _____

Date: _____