

PHYSICAL THERAPY PRESCRIPTION



UC Irvine Health

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DISTAL CLAVICLE EXCISION PROTOCOL

Surgical Date: _____

Side: Right Left

Diagnosis: Distal Clavicle Excision

Postop	Goals	Precautions	Exercises
Weeks 0-4 HEP daily	Edema and pain control FF 140°, ER 40° IR behind back	Sling 0-2 weeks for comfort only DC sling over 2-4 weeks No abduction >90° No rotation in 90° abduction No resisted motions	Elbow, wrist, hand ROM Codman/Pendulum Shoulder P/AA/AROM as tolerated Posterior capsule stretch Posture training
Weeks 4-8 HEP daily	FF 160°, ER 60°	No sling No abduction >90° Avoid cross body adduction Avoid 90/90 ER	Advance P/AA/AROM as tolerated Begin gentle isometrics (arm at side) Progress to bands (arm at side)
Weeks 8-12 HEP daily	Full ROM Return to activity	No sling Strengthening only 3x/week to avoid rotator cuff tendinitis	Continue ROM exercises Advance strengthening as tolerated Begin eccentric resisted motion and closed chain exercises
Weeks 12+ HEP daily	No restrictions	None	Maintenance exercises

Frequency & Duration: 1-2 2-3 x/week for _____ weeks _____ Home Program

Physician's Signature: _____ **M.D.**