POST-OPERATIVE PROTOCOL

Acromioclavicular Joint Stabilisation

ACJ stabilisation: holding the collarbone back in place

Dr Aditya Malik
FRCS (Tr&Orth) Edinburgh
drdityamalik.com

This sheet takes you through your recovery, phase by phase, after an acromioclavicular joint (ACJ) stabilisation. For the first six weeks the repair is healing, so the early weeks are about protecting it while keeping the rest of the arm moving; after that, the movement and strength are built back up.

SLING	EXERCISES	LIFTING AND CARRYING	STRENGTHENING
3 weeks	3 times a day	Not for 6 weeks	From 3–6 weeks

Your operation

The acromioclavicular joint, or ACJ, is the small joint at the top of the shoulder where the end of the collarbone meets the shoulder blade. Strong ligaments, the tough bands that hold bones together, keep it in place. A fall onto the shoulder can tear them, so that the end of the collarbone rides up and shows as a bump (an ACJ dislocation).

In an ACJ stabilisation, the surgeon puts the collarbone back in line and holds it there, usually with a strong artificial ligament or cord that ties it down to the shoulder blade below. Your own tissues then heal around it. Until they have, the repair can be stretched or pulled loose, which is why the first 6 weeks come with limits.

Your sling

- Wear the sling for 3 weeks, day and night, including in bed. It supports the arm, and keeps it out of positions that could strain the repair.
- Take it off only to wash, and to do your exercises. To wash under your arm, sit and rest the forearm on a table, so that the arm stays supported.
- While the arm is in the sling, you can still use your hand for light tasks, such as writing and eating.
- Using your hand for light tasks like these helps: people who use the hand early tend to have less pain and better movement later.

While the repair heals, avoid

- Lifting anything heavier than about half a kilo (a small bottle of water), for 6 weeks.
- Carrying bags, or anything else that pulls the arm downwards, for 6 weeks.
- Taking your weight on the arm, for example pushing up from a chair or bed, for 6 weeks.
- Reaching behind your back, for example to tuck in a shirt, until about 8 weeks.

Easing pain and swelling

- Take your painkillers regularly, as prescribed, rather than waiting for the pain to build up. The exercises are much easier when the pain is under control.
- An ice pack wrapped in a thin towel, for up to 20 minutes at a time, several times a day, eases pain, swelling and bruising. Keep the dressing dry.
- Many people sleep better propped up on pillows, with a pillow supporting the operated arm.

Getting back to everyday life

- Driving: ask your doctor before you drive again. When you can depends on your progress, and on feeling confident that you can control the car safely.
- Heavy lifting: your return to heavy lifting is built up gradually, and planned separately for each person, depending on your work and what it demands of your shoulder.
- Swimming: from about 3 months, starting with gentle breaststroke.
- Sport: your return to sport is built up gradually, and planned separately for each person, depending on the sport and what it demands of your shoulder.

What to expect

Most of the movement comes back over the first 3 months, and strength and confidence keep building after that. The aim is a stable, comfortable shoulder that moves as freely and as far as it allows, which varies from person to person.

CONTACT THE CLINIC URGENTLY IF

- You have a fever, or feel unwell.
- The wound becomes red, hot or more swollen, or starts to leak.
- The pain suddenly gets much worse, or your painkillers are not controlling it.
- Your hand goes numb, or your fingers turn cold, pale or blue.
- You have pain or swelling in your calf.
- You have a fall, or the shoulder suddenly feels different.

Clinic: +91 99197 03477. If you are short of breath or have chest pain, go to the nearest emergency department straight away.

BEFORE YOU BEGIN

- Start Phase 1 on the day after your operation, unless you are told otherwise.
- Move slowly and smoothly. Some discomfort is normal, but stop if a movement causes sharp pain, and never force it.
- Keep within the limits for your phase. Check in a mirror that your shoulder does not hitch up towards your ear as you move.
- The timings are a guide. Follow these exercises as they are written unless Dr Malik tells you otherwise.
- This sheet does not replace individual advice. If it differs from what you were told in clinic, follow the advice you were given there.

WEEKS 0–3

Phase 1: Protecting the repair

The repair is at its most fragile. Keep the sling on, except to wash and to do these exercises. Move the shoulder only within these limits: forwards to about 60°, two-thirds of the way to shoulder height; out to the side to about 45°, halfway to shoulder height; and turning outwards to about 30°.

01 Elbow, wrist and hand

Keeping the joints below the shoulder moving while the arm is in the sling.

1. Elbow: with the sling off and your upper arm resting at your side, bend and straighten the elbow as far as it goes.
2. Forearm: with the elbow bent at your side, turn your palm up to face the ceiling, then down to face the floor.
3. Wrist and hand: circle your wrist both ways, then make a fist and spread your fingers wide.

REPETITIONS	HOW OFTEN
10 of each	3 times a day

02 Shoulder blade exercises

Keeping the shoulder blade moving freely, and helping your posture.

1. Sit or stand up tall, with the operated arm resting in the sling.
2. Shrug your shoulders gently up towards your ears, then let them drop and relax.
3. Draw your shoulders gently forwards, then squeeze your shoulder blades back and down. Hold for 5 seconds, and relax.

REPETITIONS	HOW OFTEN
10 of each	3 times a day

03 Table slides

Moving the shoulder, with the table taking the weight of the arm.

1. Sit at a table with your operated arm resting on it, the hand on a small towel.
2. Lean your body forwards so that your hand slides forwards along the table. The arm moves because you lean, not because you lift it.
3. Slide forwards, and a little out to the side, only as far as is comfortable and within the limits for this phase.
4. Sit back to slide the hand back.

REPETITIONS	HOW OFTEN
10	3 times a day

04 Turning the arm outwards

Keeping the outward turn of the arm, within a small, safe range.

1. Lie on your back with your operated elbow bent to a right angle and tucked into your side. A folded towel under the elbow helps.
2. Hold a stick, such as a rolled umbrella, in both hands.
3. Use your other arm to push the operated hand slowly outwards, keeping the elbow tucked in.
4. Go no further than about 30°: a third of the way from pointing straight ahead to pointing out to the side.

REPETITIONS	HOW OFTEN	LIMIT
10	3 times a day	About 30° until 6 weeks

05 Gentle muscle tightening

Waking up the shoulder muscles without moving the joint.

1. Stand side-on to a wall, the operated arm nearest to it, with the elbow bent to a right angle and tucked into your side. The arm does not move in this exercise.
2. Outwards: press the back of your wrist gently against the wall.
3. Sideways: press the outside of your elbow gently against the wall.
4. Inwards: in a doorway, press the palm side of your wrist gently against the door frame.
5. Use only about a third of your full strength. It should not hurt.

HOLD	REPETITIONS	HOW OFTEN
5 seconds	10 each way	3 times a day

> MOVING ON At about 3 weeks you can start to leave off the sling. Move on when your pain is under control and you can do these exercises smoothly.

WEEKS 3–6

Phase 2: Leaving the sling

Stop wearing the sling gradually, over a few days. Carry on with the Phase 1 exercises, and add these. You can now lift the arm on its own, forwards up to shoulder height and out to the side to about 60°. Turning outwards stays at about 30° until 6 weeks, and the limits on lifting, carrying and reaching behind your back still apply.

06 Raising the arm

Lifting the arm on its own, within the limits for this phase.

1. Stand or sit up tall. Raise the arm forwards, with your thumb pointing up, no higher than shoulder height, and lower it slowly.
2. Then raise it out to the side in the same way, no higher than about 60°: two-thirds of the way to shoulder height.
3. Start with the elbow bent if you need to. As it gets easier, keep the elbow straight.
4. Use a mirror: your shoulder should not hitch up towards your ear. If it does, go back to the table slides (exercise 03) for a while.

REPETITIONS	HOW OFTEN
10 of each	3 times a day

07 Strengthening the arm

Starting to build up the muscles that bend and straighten the elbow.

1. Hold a light weight, no heavier than about half a kilo, such as a small bottle of water, in the hand of your operated arm.
2. Front of the arm: sitting, with your elbow at your side, bend the elbow fully, then lower the weight slowly.
3. Back of the arm: lean forwards with your other hand on a table, and your operated upper arm held against your side. Straighten the elbow backwards, then bend it slowly.
4. Increase the weight only after 6 weeks, gradually, as the arm allows.

REPETITIONS	HOW OFTEN	WEIGHT
10 of each	3 times a day	Half a kilo at most, until 6 weeks

> **MOVING ON** Move on at about 6 weeks, when your pain is under control, your movement is steadily improving, and your shoulder does not hitch up as you move.

WEEKS 6–12

Phase 3: Regaining movement and strength

Most of the limits are now lifted: you can begin to lift, carry and take weight on the arm, building up gradually. Take the arm further now, including turning it outwards beyond 30°. By about 12 weeks, aim to move the arm as freely and as far as your shoulder allows: how far varies from person to person. Your physiotherapist will add strengthening for the shoulder and arm, and work on its control and steadiness, building up to what your daily life, work and sport need.

08 Raising the arm higher

Taking the arm above shoulder height, a little at a time.

1. Lie on your back with a pillow under your head. Hold the wrist of your operated arm with your other hand.
2. With your other hand helping, raise the arm up and over towards your head, as far as is comfortable, then lower it slowly.
3. When that is easy, do the same sitting and then standing, forwards and out to the side, as high as is comfortable.
4. Use a mirror: your shoulder should not hitch up towards your ear.

REPETITIONS	HOW OFTEN	NEXT STEP
10	3 times a day	Less help from the other hand

09 Reaching behind your back

Regaining the movement you need to reach behind you, for example to tuck in a shirt.

1. Stand holding a towel behind your back, the operated hand at the lower end.
2. Use your other hand to draw the towel upwards, gently sliding the operated hand up your back.
3. Hold the stretch for 10 seconds, then relax. Never force it.

REPETITIONS	HOW OFTEN	START
10	3 times a day	From about 8 weeks

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