

## Rehabilitation Protocol: Subacromial Balloon Spacer

### Precautions

---

<i>Distal Clavicle Excision</i>	- Hold horizontal cross body adduction until 8 weeks
<i>Biceps Tenodesis</i>	- Limit active elbow flexion of biceps beyond 90 deg & limit eccentric loads on biceps for 6 wks postop - Avoid abduction and 90/90 ER until 8 wks - No resisted elbow flexion until 8 wks

---

### Phase I: 0-4 weeks

- Brace: Sling x2 weeks strict, then wean out by 4 weeks
- ROM:
  - Weeks 0-2:
    - Elbow/wrist/hand ROM, pendulums x2 weeks
    - Weeks 2-4:
      - Supine and progression to seated elevation by 6 weeks. Passive to active ROM as tolerated: 140 FF, 40 ER with arm at side, IR behind back with gentle posterior capsule stretching.
      - No rotation of arm in abduction until 4 weeks.
- Weightbearing: Non-weightbearing
- Exercises:
  - Weeks 0-2:
    - Pendulums
    - Grip strengthening
  - Weeks 2-4:
    - Motion emphasis
    - Pulleys/canes
    - Begin scapular protraction/retraction

### Phase II: 4-8 weeks

- Brace: no sling
- ROM: advance active ROM as tolerated (goals: FF 160, ER up to 60). No horizontal cross body adduction until 8 weeks for DCE.
- Weightbearing: <10 lbs
- Exercises:
  - Begin isometrics with arm at side, rotator cuff, and deltoid
    - o ER/IR (submaximal) at neutral
  - Advance to therabands as tolerated
  - Capsular stretching at end ROM to maintain flexibility

### Phase III: 8-12 weeks

- Brace: None
- ROM: as tolerated
- Weightbearing: progress as tolerated
- Exercises:
  - Advance to full, painless ROM

- Below shoulder level strengthening
- GOAL of procedure: Return to functional ADLs. Patient will not return full strength.