



UNION GENERAL ORTHOPEDICS & SPORTS MEDICINE

AFFILIATE OF: UNION GENERAL HEALTH SYSTEM

Jacob B. Stirton, MD

www.jacobstirtonmd.com

706-439-6858

ELBOW OLECRANON FRACTURE ORIF PHYSICAL THERAPY

Philosophy

This protocol is to be utilized as a guideline. There will always be individual differences amongst patients regarding progression and tolerance of specific activities. Progression through the protocol will depend on successful accomplishments of set milestones as assessed by the physician and the physical therapist/athletic trainer.

The physical therapist and patient must constantly be aware of changes in condition, including but not limited to signs and symptoms of joint irritation/pain, tendonitis, and effusion. The patient's home exercise program is of utmost importance and should be monitored and emphasized.

Rehabilitation should create the optimal environment for the natural process of healing to occur. Initially, there should be a strong emphasis on minimizing swelling and pain as well as motion restoration. If a patient's progress is significantly delayed, please contact the physician office to keep them informed.

If you have any questions regarding this protocol, please contact the UGH Orthopedics and Sports Medicine Department at (706) 439-6858.

CAUTION: Return to intense activities such as lifting and sports early post-operatively may increase the overall chance of setbacks like reinjury and symptoms of pain, swelling, or instability should be closely monitored and reported by the patient.



UNION GENERAL ORTHOPEDICS & SPORTS MEDICINE

AFFILIATE OF: UNION GENERAL HEALTH SYSTEM

Jacob B. Stirton, MD

www.jacobstirtonmd.com

706-439-6858

Phase I (0-6 weeks)- Protective

Goals

1. Protect repair; educate patient regarding post-operative precautions
2. Decrease pain and inflammatory response
3. Allow healing

WEEKS 1-2

Brace: Posterior splint with elbow at 90° flexion

Cryotherapy: To elbow joint and graft site at the wrist

Range of Motion: Wrist AROM (flexion & extension) immediately postoperatively Exercises:

- Gripping exercises
- Wrist ROM
- Shoulder isometrics (no shoulder internal rotation)
- Biceps isometrics

WEEKS 3-6

Cryotherapy: Continue ice to elbow joint and graft site

Exercises:

- Continue all exercises listed above
- Elbow ROM 0-90 degrees
- Initiate isometric elbow extension
- Initiate wrist isometrics
- Continue wrist ROM exercises
- Initiate AROM shoulder
 - Full can
 - Lateral raises
 - ER/IR



UNION GENERAL ORTHOPEDICS & SPORTS MEDICINE

AFFILIATE OF: UNION GENERAL HEALTH SYSTEM

Jacob B. Stirton, MD

www.jacobstirtonmd.com

706-439-6858

Phase II (6-10 weeks) – Mid Phase

Goals

1. Gradual increase in range of motion
2. Promote healing of repaired tissue
3. Regain and improve muscular strength

WEEKS 6-8

Exercises:

- Continue all exercises listed above
- Elbow ROM 0-130 degrees
- Begin light resistance exercises for arm (1 lb):
 - wrist curls and wrist extension
 - pronation/supination
 - Elbow extension/flexion.
- Progress shoulder program, emphasizing rotator cuff and scapular strengthening (avoid ER until week 6)
- Initiate shoulder strengthening with light dumbbells

WEEKS 9-10

Exercises:

- Continue all exercises and progress all shoulder and UE exercises in brace (progress 1# weight)
- Progress to full elbow ROM

Phase III (10+ weeks) – Advanced Phase

Goals:

1. Increase strength, power, endurance
2. Maintain full elbow ROM
3. Gradually initiate sporting activities

WEEKS 10+

Exercises:

- Continue all exercises
- Initiate machine strengthening
- Initiate return to full activities