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Physical Therapy Prescription for:

label

Diagnosis: Olecranon Fracture
Surgical Procedure: ORIF
[ ] plate [ ] tension band
Date of Surgery:
Eval & Treat: 2x/week x 12 weeks

Precautions/Limitations:
- No aggressive elbow flexion 4-6wks
- No biceps strengthening for 6wks

Weeks 0 to 2 (Immediate Postoperative Period – Protection Phase)
- Elevation
- Posterior mold splint or cast 0°-90°

Weeks 2 to 4 (Goal: edema control, begin PROM):
- Splint/cast removed, sutures removed, switched to hinged elbow brace
- No active elbow flexion
- PROM/AAROM elbow start 30°-100°, progress as tolerated to 15°-105°
- PROM/AAROM full pronation/supination with elbow at 90°flexion
- Shoulder mobility as needed
- Continue wrist ROM 6-8x/day
- Week 3: Initiate shoulder rehab program
  - tubing IR/ER
  - full can
  - lateral raises
- Initiate light scapular strengthening
- Bicycle ok for lower extremity strength & endurance

Weeks 4 to 6 (Goal: protect repair, improve ROM):
- AROM ok starting at week 4
- Elbow ROM 0°-125° – progress extension as tolerated
- Sub-maximal pain-free biceps/triceps isometrics with forearm in neutral
- Light resistance exercises:
  - Wrist curls, extensions, pro/sup
  - Elbow extension
  - Progress shoulder program emphasizing rotator cuff and scapular stabilizers

Weeks 6 to 8 (Goal: complex movements)
- Ok to begin combined motions at elbow (e.g. extension w/pronation)
- Elbow ROM 0°-135°, progress to full flexion (145°)
- Discontinue brace
- Progress all shoulder an UE exercises to 1lb weights
- Initiate biceps strengthening

Weeks 8 to 12 (Goal: strengthening)
- Progressive resistance exercise program for all elbow motions

Weeks 12 to 14 (Goal: return to activity)
- Continue strengthening program
- May begin training programs for return to throwing, tennis, golf, gymnastics etc.

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Lauren H. Redler, M.D. Date