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PHYSICAL THERAPY PROTOCOL RADIAL HEAD FRACTURE

RADIAL HEAD FRACTURE	
Procedure	Date of Surgery/Injury:
	R L B/L
	[] Radial Head Replacement
	[] Radial Head Repair
	[] Radial Head Excision
	[] Closed Treatment of Radial Head Fracture
Plan	Physical Therapy for R L B/L Elbow
	2-3x Per Week x 8 Weeks
General Guidelines	Goal: Regain full pain-free ROM of elbow and prevent shoulder and wrist stiffness.
	Please read and follow guidelines below. Progression is both criteria-based and patient
	specific. Phases and time frames are designed to give the clinician a general sense of
	progression. Phases and time frames are designed to give the clinician a general sense of
	progression. Concomitant injuries may alter the guidelines.
	Follow physician's modifications as prescribed
Phase I (Weeks 0-2)	 Elbow active ROM and active-assisted ROM for flexion and extension.
	o Goal is 15° to 105° of motion by 14 days.
	 Avoid flexion in pronation and any valgus loads on the elbow.
	o ROM should be performed with the arm adducted close to the body.
	Consider extension splinting per surgeons instruction.
	Putty/grip exercises.
	Isometric strengthening exercises for the elbow and wrist.
Phase II (Weeks 2-6)	Continue elbow active and active assisted ROM exercises.
	Full flexion and extension ROM should be achieved by the end of 6 weeks.
	Begin active and active assisted supination and pronation.
	Begin light isotonic strengthening of flexion and extension.
	Maintain shoulder, wrist, hand strength and ROM.
Phase III (Weeks 7-12)	Emphasize return to function/sport
	Continue active and active assisted supination and pronation.
	• Full pronation and supination should be achieved by the end of 8 th week.
	Progressively increase isotonic strengthening in flexion/extension and ,
	pronation/supination.
	Work on any deficits.