Physical Therapy Prescription

Jesse Kaplan, MD / MBA

Hand and Upper Extremity Surgery 101 The City Drive South Pavilion III, Building 29A Orange, CA 92868

Phone: 714-456-7012 www.jessekaplanmd.com



Patient Sticker

Clavicle Fracture ORIF Protocol

Surgical Date:

Side: Right Left

Phase	Goals	Precautions	Exercises
Phase 1: Weeks 0 - 6	Edema and pain control Protect Repair	Sling at all times including sleep OK to remove for showers and exercises Avoid weight bearing on arm	Codman and Pendulum Scapular stabilization Elbow, wrist, hand ROM OK to begin ROM below shoulder level at 2 weeks
Phase 2: Weeks 6-12	Increase ROM Shoulder flexion/ abduction to tolerance Progressive IR/ER as tolerated	DC sling Avoid forceful pushing/pulling/lifting overhead	Advance P/AA/AROM as tolerated Continue isometrics Progress to bands as tolerated scapular stabilization Progress AA/PROM to FF 155°, ABD 135°, ER 45°, ABER 90°, ABIR 45° AROM in the plane of the scapula (supine → standing) Begin ER & IR isometrics Modalities as needed
Phase 3: Weeks 13 - 16	Full ROM Normalize scapulohumer al rhythm throughout ROM Restore strength 5/5	Avoid painful ADL's Avoid rotator cuff inflammation Avoid excessive passive stretching OK to begin running/cycling	A/AA/PROM no limits Theraband exercises Scapular PREs Advance scapulohumeral rhythm Endurance: upper body ergometer (UBE) Begin resistive strengthening for scapula, biceps, triceps, and rotator cuff once ROM 75%
Phase 4: Weeks	Progress towards full activities	Weight training/ contact sports	Progress with strengthening program Sport specific training

16+	Return to full sports if fracture healed				
Treatment: 1-2 2-3 times per week for weeks. Home Program Modalities PRN (Ultrasound/Phonophoresis/E-stim/Ice/Heat)					
Physician's Signature:					
	Jesse	e Kaplan, MD			