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## REHABILITATION GUIDELINES FOR PROXIMAL HUMERUS FRACTURE - ORIF

PHASE I (1-3 WEEKS)

DATES:

Appointments	<ul style="list-style-type: none"><li>• Begin physical therapy at 1 week post op, 2 x/week</li><li>• Follow up with MD 10-14 days post op.</li></ul>
Rehabilitation Goals	<ul style="list-style-type: none"><li>• Protect repair</li><li>• Minimize pain and swelling</li><li>• Maintain ROM of surrounding joints</li><li>• Prevent adhesive capsulitis</li><li>• Minimize cardiovascular deconditioning</li></ul>
Precautions	<ul style="list-style-type: none"><li>• Sling at all times or per MD</li><li>• No AROM, lifting, pushing, pulling x 6 weeks</li><li>• No ER &gt; 40 degrees or excessive shoulder EXT x 6 weeks</li><li>• No supporting of body weight</li></ul>
Suggested Therapeutic Exercises	<ul style="list-style-type: none"><li>• PROM of shoulder:<ul style="list-style-type: none"><li>- Flexion to 90 degrees</li><li>- ER to 30 degrees</li><li>- IR to tolerance (no behind back)</li></ul></li><li>• Scapular clocks:<ul style="list-style-type: none"><li>- Elevation, depression, retraction, protraction</li></ul></li><li>• Pendulums (Codman's)</li><li>• Incision mobilization</li><li>• Cervical, hand, wrist, elbow AROM – thumb to shoulder, make fist</li></ul>
Cardiovascular Exercises	<ul style="list-style-type: none"><li>• Stationary bike in sling</li></ul>
Progression Criteria	<ul style="list-style-type: none"><li>• Per X-ray evidence of healing</li><li>• PROM flexion to 90 degrees, ER to 30 degrees</li></ul>

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PHASE II (WEEKS 3-6)

DATES:

Appointments	Continue physical therapy 2 x/week
Rehabilitation Goals	<ul style="list-style-type: none"> <li>• Regain PROM</li> <li>• Gentle functional use</li> <li>• No resistance</li> </ul>
Precautions	<ul style="list-style-type: none"> <li>• Sling and ROM limitations per MD</li> <li>• No IR/ER</li> <li>• No driving</li> <li>• No pushing, pulling, lifting</li> <li>• No cuff strengthening</li> </ul>
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> <li>• PROM in scapular plane (no hand behind back IR)</li> <li>• AAROM:             <ul style="list-style-type: none"> <li>- flexion to 90 degrees</li> <li>- ER to 40 degrees</li> </ul> </li> <li>• Pulleys</li> <li>• AROM of elbow, wrist and hand</li> <li>• Continue scapular isometrics and clocks</li> <li>• Grade I-II GH and scapular mobilizations</li> </ul>
Cardiovascular Exercises	<ul style="list-style-type: none"> <li>• Cardiovascular conditioning in sling per MD</li> <li>• UBE no resistance</li> <li>• Stationary bike</li> <li>• Pool at week 3 for ROM maintaining MD ROM limits</li> </ul>
Progression Criteria	<ul style="list-style-type: none"> <li>• Per X-ray evidence of healing</li> <li>• AAROM flexion to 90 degrees, ER to 40 degrees</li> </ul>

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PHASE III (WEEKS 6-12)

DATES:

Appointments	<ul style="list-style-type: none"> <li>Continue physical therapy 2 x/week, may decrease to 1 x week per PT discretion</li> </ul>
(Phase III continued) Rehabilitation Goals	<ul style="list-style-type: none"> <li>Regain full PROM</li> </ul>
Precautions	<ul style="list-style-type: none"> <li>Sling use per MD based on x-ray evidence of healing</li> <li>May begin driving</li> <li>20 # weight limit</li> <li>No pushing or pulling</li> <li>No overhead activity</li> </ul>
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> <li>Continue PROM/AAROM/AROM cervical, shoulder, elbow, wrist and hand</li> <li>Pec minor stretching to minimize scapular protraction with flexion</li> <li>Submaximal isometric RTC exercises at 6 weeks</li> <li>Progressive isotonic RTC exercises at 8 weeks, low weights, high reps</li> <li>Grade III-IV GH and scapular mobilizations at 8 weeks</li> <li>Posterior scapular stretching at 8 weeks if needed</li> <li>General UE strengthening at 10 weeks</li> </ul>
Cardiovascular Exercises	<ul style="list-style-type: none"> <li>UBE with light resistance</li> <li>Stationary bike</li> <li>Swimming per MD</li> </ul>
Progression Criteria	<ul style="list-style-type: none"> <li>Advance to work/sport specific conditioning once AROM is = bilateral and strength is 4+/5 in all directions</li> </ul>

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PHASE IV (WEEKS 12 +)

DATES:

Appointments	Continue physical therapy 1 x/week
Rehabilitation Goals	<ul style="list-style-type: none"> <li>• Full ROM in all planes</li> <li>• Transition to HEP</li> </ul>
Precautions	<ul style="list-style-type: none"> <li>• Per MD but generally no lifting, pushing or pulling precautions at this point</li> <li>• No overhead lifting until 4-6 months post op</li> </ul>
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> <li>• AROM of cervical shoulder, elbow, wrist and hand emphasizing end ROM</li> <li>• GH and scapular joint mobilizations as needed</li> </ul>
(Phase IV continued) Suggested Therapeutic Exercises	<p>Pec minor stretching</p> <ul style="list-style-type: none"> <li>• Posterior capsule stretching</li> <li>• Anterior deltoid strength and scapular stabilization</li> <li>• General UE strengthening</li> </ul>
Cardiovascular Exercises	<ul style="list-style-type: none"> <li>• No restrictions</li> </ul>
Progression Criteria	<ul style="list-style-type: none"> <li>• DC to HEP</li> </ul>