



Mammoth Orthopedic
Institute

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CLAVICLE FRACTURE ORIF PROTOCOL

This protocol is to be used with a well stabilized clavicle fracture. Frequency of therapy is initially 1-2 times weekly depending on the ability of the patient to follow-through at home. Therapy may be increased to 3 times weekly for patients who are not progressing well.

Weeks 0-6

Initial evaluation to include evaluation of
AROM of shoulder, elbow, forearm, wrist, and digits

Edema

Patient's usual daily activities

Functional limitations

Sensation

Instruction in home exercise program for range of motion of shoulder, elbow, forearm, wrist and digits; exercises should be performed multiple times throughout the day

Pendulums

Supine external rotation

Supine assisted arm elevation to 90 degrees (weeks 1-3)/120 degrees (weeks 3-6)

Isometric internal and external rotation in neutral

Elbow and forearm exercises

Ball squeezes

Scapular retraction

Patient to continue cryotherapy for edema

Continue sling use

Avoid elevating the affected arm above 90 degrees in any plane for the first 3 weeks post-operatively

Do not lift any objects greater than 1-2 pounds using the surgical arm

Avoid excessive reaching and internal/external rotation

May use heat if joint stiffness is present; continue use of cold pack after exercise

Weeks 7-12

Wean from sling
Joint mobilization and PROM as needed to gain full ROM
Gradual increase in arm movement for daily activities
Progress strengthening for entire upper extremity
AROM/AAROM
Shoulder flexion at neutral and in scapular plane
Internal and external rotation at 90degrees abduction
Proprioception/Rhythmic stabilization
Scapulohumeral rhythm exercises
Sidelying ER
Prone rows/extension
Prone Ts/Ys
Serratus punch
Pushups into the wall (week 8)
Work simulation tasks

If the patient has met goals by week 8, they may be discharged with a home program to continue to gain end range and strength. Keep in mind that full function after a wrist fracture usually takes at least 6 months and up to 2 years to achieve. Emphasize to the patient the need to continue home exercises as well as the fact that they will continue to improve for quite some time. Those patients who have not met goals due to complications or having a complex fracture may need to continue therapy longer than 8 weeks post-op.

Weeks 13-18

Avoid lifting weighted objects overhead
Avoid lifting arm when carrying objects greater than 1-2 pounds
Avoid pushing/pulling activities
No other daily activity restrictions
Continue stretching and range of motion exercises as outlined above
Continue exercises as outlined above, progressively adding 1-5 pounds of resistance
Can begin limited weight training

Weeks 19-28

Progress functional activities
Continue to progress strengthening
Begin closed kinetic chain exercises
Increase plyometric activities
Rebounder throws
Wall dribbles
Deceleration drills
May progress weight training
Begin sport specific training/activities