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PHYSICAL THERAPY PROTOCOL 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.
	 Goal is 15° to 105° of motion by 14 days.
	\circ Avoid flexion in pronation and any valgus loads on the elbow.
	 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 8th week.
	 Progressively increase isotonic strengthening in flexion/extension and
	pronation/supination.
	 Work on any deficits.