Prisma Health Blue Ridge Orthopaedics-Easley 309 E. 1st Ave Easley, SC 29640 P: 864-850-2663 F: 864-306-0012



Prisma Health Blue Ridge Orthopaedics-Powdersville 11402 Anderson Road Greenville, SC 29611 P: 864-631-2799 F: 864-522-1245

Sports Medicine and Shoulder Surgery

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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		
	Additional		
	Procedures:		
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.		
	 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 		

Driana Llash		Driana Llaalth	
Prisma Health		Prisma Health	
Blue Ridge Orthopaedics-		Blue Ridge Orthopaedics-	
Easley		Powdersville	
309 E. 1 st Ave	Sports 🕂 Shoulder	11402 Anderson Road	
Easley, SC 29640	Sports Shoulder	Greenville, SC 29611	
P: 864-850-2663		P: 864-631-2799	
F: 864-306-0012		F: 864-522-1245	
Dr. Gabriella Ode			
Sports Medicine and Shoulder Surgery			
www.GOsportsmed.com			
	 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.

Updated Sept. 2021