

Rehabilitation Guidelines for Proximal Humerus Fracture (Non-Operative)



Dr. MacLean

Phase 1 (1-3 weeks)

APPOINTMENTS

- No physical therapy for 3 weeks, unless otherwise specified by doctor

REHABILITATION GOALS

- Modalities to control pain and swelling
- Protect fracture site
- Maintain ROM in surrounding joints
- Prevent deconditioning

PRECAUTIONS

- ROM and weight-bearing limitations per doctor
- Sling at all times for 3 weeks (or per doctor)
- No cuff strengthening

SUGGESTED THERAPEUTIC EXERCISES

- AROM cervical, elbow, wrist and hand
- Scapular clocks, shrugs, pinches, PNF

CARDIOVASCULAR EXERCISES

- Bike in sling, walking on treadmill in sling

PROGRESSION CRITERIA

- X-ray evidence of healing
- Clearance from doctor to begin physical therapy

Phase II (3-6 weeks)

APPOINTMENTS

- Begin physical therapy at 3 weeks post-injury if cleared by doctor
- Physical therapy 1-2 times/week

REHABILITATION GOALS

- Regain full ROM
- Restore GH and scapula-thoracic rhythm
- Minimize deconditioning
- Modalities to control pain and swelling

PRECAUTIONS

- DC sling at 3 weeks if cleared by doctor
- AAROM to 90 degrees forward flexion and 40 degrees ER

SUGGESTED THERAPEUTIC EXERCISES

- AROM cervical, elbow, wrist and hand
- Pendulums
- Gripping exercises
- Scapular PNF
- Progress to full PROM all planes
- Supine AAROM for flexion (90 degrees), ER (40 degrees) and hyperextension
- Submaximal RTC isometrics in neutral for IR, ER, EXT and ABD

CARDIOVASCULAR EXERCISES

- Treadmill, bike

PROGRESSION CRITERIA

- X-ray evidence of healing
- Full PROM

*If you have any problems or questions,
please call your doctor's office (8am-5pm).*

Answering service for after hours.

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Phase III (6-8 weeks)

APPOINTMENTS

- Continue physical therapy 1-2 times/week

REHABILITATION GOALS

- Restore full AROM
- Increase strength

PRECAUTIONS

- Allow full PROM, AAROM and AROM without substitution

SUGGESTED THERAPEUTIC EXERCISES

- Begin with supine AROM flexion, no weights; progress to weights
- Standing wand assisted flexion
- Pulleys with eccentric lowering of involved arm
- Progress all other AROM, supine first then standing
- PNF

CARDIOVASCULAR EXERCISES

- Bike, treadmill, light jogging/swimming (if cleared by doctor)

PROGRESSION CRITERIA

- Full AROM

Phase IV (10+ weeks)

APPOINTMENTS

- Continue physical therapy 1-2 times/week

REHABILITATION GOALS

- Increase RTC strength
- Restore scapula-humeral rhythm

PRECAUTIONS

- None

SUGGESTED THERAPEUTIC EXERCISES

- Posterior capsule stretching if indicated
- Isotonic exercises for RTC, scapular muscles
- PRN
- Theraband rows, ER, IR, shoulder extension
- Progressive strengthening program using bands, light dumbbells for RTC, deltoid and scapula
- Prone scapular strengthening (Ts, Ys, Ws)
- Begin overhead exercises (if no impingement)
 - Ball taps
 - Total Gym pull ups

CARDIOVASCULAR EXERCISES

- No restriction unless directed by doctor

PROGRESSION CRITERIA

- DC to HEP

REFERENCES

Godges, Joe, DPT, MA, OCS. Loma Linda University and University of Pacific Doctorate in Physical Therapy Programs. *Nonoperative and postoperative Rehabilitation*. Retrieved from <https://xnet.kp.org>

Kaar, Scott, M.D., Mitchell, William, M.D., Verry, Christian, M.D. St. Louis university Care Physician Group Department of Orthopedic Surgery Sports Medicine and Shoulder Service. *Proximal Humerus Fracture Nonoperative Protocol Prescription*. Retrieved from <http://www.slu.edu>