**OPEN REDUCTION INTERNAL FIXATION OF CLAVICLE FRACTURE**

**POST-OP INSTRUCTIONS AND REHAB PROTOCOL**

This protocol may vary in length and aggressiveness depending on factors such as: fracture stability and comminution (how bad the fracture is), how fast the healing occurs after surgery, rehab goals and expectations for each individual.

**For Patients at a glance:**

a. Spend the first few days after surgery resting and recovering. Keep activity at a minimum. It is usually more comfortable to sleep in an elevated position either on a recliner or with you upper back propped up with pillows.

b. Sling is generally used for 4-6 weeks after surgery to protect the surgical repair. It is ok to remove the sling for bathing/grooming and while you are at home and sitting down. When walking wear the sling and especially when you are outside the home. Wear the sling for sleeping for the first 4 weeks.

c. **Dressing:** In most cases a waterproof bandage will be used. Remove the sling for showering otherwise may shower normally with the waterproof bandage. Do not soak the bandage, just let soap/water run off your shoulder. Unless you were given instructions by Dr. Hazelwood otherwise, leave you bandage on until your first post-op appointment in 10-14 days.

d. If you had a **nerve block at the time of surgery, it usually wears off the day after surgery or the following day.** It is normal to have some numbness in the shoulder/arm the first few days after surgery as a result.

e. **Weight Bearing:** Do not lift off or support your body weight with the operative side. No lifting/pushing/pulling > 5 lbs with the operative side.

f. **Pain Medication:** Take the prescribed pain medications as directed. You can supplement your pain control with over the counter Tylenol and ibuprofen. Do not exceed recommended dosages on the bottle.

g. **Ice:** Use the ice machine or ice bags every 20-30 minutes every couple hours following surgery. This will help keep swelling down and control your pain.

h. **Exercises/Physical Therapy:** Once the block wears off begin exercises 3-4x/daily. Work on pendulums, table slides, elbow motion and gentle motion to shoulder height only. (See diagrams below). Physical Therapy is usually delayed until about 4 weeks after surgery for initial fracture healing. Call your therapist for your first appointment.

i. There is no conclusive data about when it is safe to return to driving after shoulder surgery. You cannot drive while taking pain medications. Generally it is a good idea to arrange for someone else to drive for you for the first week. Return to driving is highly individualized and is generally guided by your ability to drive safely and your ability to make evasive maneuvers if that was required.

**For Physical Therapists:**

**I. REHABILITATION PROTOCOL WEEKS 0-2**

a. Use sling. Ok to remove for exercises

b. 3-4x times per day work on pendulum exercises, table slides

c. Work on range of motion of wrist, elbow and grip strength beginning the day after surgery

d. No lifting with operative arm exceeding 5-10 lbs

e. Passive elevation/active assisted forward elevation 90 degrees

f. IR/ER scapular plane to tolerance

g. Modalities

h. **Weight Bearing:** Non weight bearing, 5 lb lifting

**II. REHABILITATION PROTOCOL WEEKS 2-6**

a. **Sling: Continue to use until week 4**, remove for exercises. Wean as tolerated after week 4.

b. **Passive motion:** advance as tolerated

c. **Active/active assisted ROM:** begin at week 2. Keep flexion/abduction < 90. At week 4 progress as tolerated.

d. ER with dowel/cane

e. Periscapular strengthening

f. Deltoid isometrics

g. Recumbent bike, begin stationary at 4-6 weeks

h. Modalities

i. **Weight Bearing:** Non weight bearing, 5 lb lifting

**III. REHAB PROTOCOL WEEKS 6-12**

a. Sling is no longer necessary

b. Progress active range of motion as tolerated.

c. Progress isometric program: flex/ext, IR, ER

d. Scapular stabilization exercises/strengthening

e. It is ok to return to normal routine activities of daily living

f. Exercise bike, elliptical, treadmill walking

g. No upper body strength training yet. Lifting restriction 10 lbs.

h. Week 10: rotator cuff/deltoid/trapezius strengthening.

**IV. REHAB PROTOCOL WEEKS 12-16**

a. Advance strengthening program as tolerated

i. Upper body strength training in gym **If radiographs demonstrate complete healing**

b. Begin jogging program

c. Return to sports is allowed between weeks 12-16, if there is radiographic healing, full range of motion and strength 90% of the nonoperative arm

