

## Unstable Proximal Humerus Fracture REHAB Protocol

### **Goal:**

Maintain ROM without displacing the proximal humerus fracture

Due to variable stability of the fracture, check for specifications and precautions ordered by the orthopedist

### **PHASE I – (0-21 Days)**

- Begin elbow, wrist and hand active ROM
- A sling and swath or Velpeau with an axillary pad should be used when not doing PT
- After 14 days, begin pendulum exercises (clockwise and counterclockwise)
- Establish a HEP so patient is performing exercise 3-5 times per day for 10 mins each session

### **PHASE II – (3-6 Weeks)**

- Begin supine ER with a cane. Fifteen to 20 degrees of abduction are permitted if the patient is more comfortable
- Begin AA FF
- Perform pulley exercises and teach for HEP
- Perform isometric exercises for IR, ER, extension, abduction at week 4&5

### **PHASE III – (7 Weeks to 2 Months)**

- Begin supine active FE. Progressively increase patient's position from supine to erect
- Use therabands of progressive strengths for IR, ER, anterior, middle posterior deltoid
- Begin flexibility and stretching exercises to progressively increase ROM in all positions
- Towel behind back, finger walking up the wall, etc.