



OPEN REDUCTION INTERNAL FIXATION CLAVICLE FRACTURE

Name: _____

Diagnosis: _____

Date of Surgery: _____

Frequency: 1 2 3 4 times / week Duration: 1 2 3 4 5 6 Weeks

___ Weeks 0 - 2

- Sling at all times except may remove for pendulum exercises 4-5 times per day
- Non weight bearing
- PROM up to 90 degrees forward elevation and 30 degrees ER
- Isometric deltoid and IR/ER at neutral rotation
- Hand squeeze, elbow/wrist/finger AROM

___ Weeks 2 - 6

- May transition out of sling as tolerated
- Progress to full PROM → AAROM → AROM as tolerated without restriction
- No lifting/resistance > 1-2 lbs
- Scapular retraction
- Elbow/forearm/ball squeeze exercises as tolerated
- Stationary bike for cardiovascular

___ Weeks 6 - 12

- Achieve full shoulder ROM prior to beginning strengthening
- Once full motion achieved, may progress to strengthening with bands/weights up to > 5 lbs
- Begin light jog/treadmill if desired

___ Weeks 12+

- Increase resistance/weight bearing/lifting as tolerated
- Progressive return to full activities
- Return to sport determined by MD

Modalities:

Other:

Signature _____

Date: _____