

### Daniel J. Kaplan, MD

Assistant Professor of Orthopaedic Surgery Chief, Division of Sports, Bellevue Hospital

**Telephone number: 929-455-2500** 

### PROXIMAL HUMERUS FRACTURE NONOPERATIVE PROTOCOL

### Phase 1—1-3 Weeks: Home Exercises Only

Appointments	No PT for 3 weeks, unless otherwise specified by MD
Rehabilitation Goals	<ul> <li>Modalities to control pain and swelling</li> <li>Protect fracture site</li> <li>Maintain ROM in surrounding joints</li> <li>Prevent deconditioning</li> </ul>
Precautions	<ul> <li>ROM and WB'ing limitations per MD</li> <li>Sling at all times x 3 weeks (or per MD)</li> <li>No cuff strengthening</li> </ul>
Suggested Therapeutic Exercises	<ul> <li>AROM cervical, elbow, wrist and hand</li> <li>Scapular clocks, shrugs, pinches, PNF</li> </ul>
Cardiovascular Exercises	Bike in sling, walking on treadmill in sling
Progression Criteria	<ul> <li>X-ray evidence of healing</li> <li>Clearance from MD to begin PT</li> </ul>

## Phase 2—3-6 Weeks Begin Shoulder Passive Range of Motion

Appointments	<ul> <li>Begin physical therapy at 3 weeks post injury if cleared by MD</li> <li>Physical therapy 1-2 x/week</li> </ul>
Rehabilitation Goals	<ul> <li>Regain full ROM</li> <li>Restore GH and scapula-thoracic rhythm</li> <li>Minimize deconditioning</li> <li>Modalities to control pain and swelling</li> </ul>

# Phase 2—3-6 weeks (Continued)

<ul> <li>DC sling x 3 weeks if cleared by MD</li> <li>AAROM to 90 degrees forward flexion and 40 degrees ER</li> </ul>
<ul> <li>AROM cervical, elbow, wrist and hand</li> <li>Pendelums</li> <li>Gripping exercises</li> <li>Scapular PNF</li> <li>Progress to full PROM all planes</li> <li>Supine AAROM for flexion (90 degrees), ER (40 degrees) and hyperextension.</li> <li>Submaximal RTC isometrics in neutral for IR, ER, EXT and ABD</li> </ul>
Treadmill, bike
<ul><li>X-ray evidence of healing</li><li>Full PROM</li></ul>

# Phase 3—6-8 Weeks: Active Range of Motion

Appointments	Continue physical therapy 1-2 x/week
Rehabilitation Goals	Restore full AROM     Increase strength
Precautions	Allowed full PROM, AAROM and AROM without substitution
Suggested Therapeutic Exercises	<ul> <li>Begin with supine AROM flexion, no weights; progress to weights</li> <li>Standing wand assisted flexion</li> <li>Pulleys with eccentric lowering of involved arm</li> <li>Progress all other AROM, supine first then standing</li> <li>PNF</li> </ul>
Cardiovascular Exercises	Bike, treadmill, light jogging/swimming (if cleared by MD)
Progression Criteria	Full AROM

# Phase 4—12+ Weeks: Strengthening

Appointments	Continue physical therapy 1-2 x/week
Rehabilitation Goals	Increase RTC strength     Restore scapula-humeral rhythm
Precautions	None
Suggested Therapeutic Exercises	<ul> <li>Posterior capsule stretching if indicated</li> <li>Isotonic exercises for RTC, scapular muscles</li> <li>PNF</li> <li>Theraband rows, ER, IR, shoulder extension</li> <li>Progressive strengthening program using bands, light dumbbells for RTC, deltoid and scapula</li> <li>Prone scapular strengthening (T's, Y's, W's)</li> <li>Begin overhead exercises (if no impingement): <ul> <li>ball taps</li> <li>Total Gym pull ups</li> </ul> </li> </ul>
Cardiovascular Exercises	No restriction unless directed by MD
Progression Criteria	DC to HEP