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Proximal Humerus Fracture Protocol

Name: _____ Date: _____

Diagnosis: _____

Date of Surgery/Injury: _____ Next Physician Appointment: _____

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

_____ Weeks 0-2:

- Wear sling at all times except for exercises and bathing
- Elbow, wrist, hand ROM. Grip strengthening.
- Begin pendulum exercises
- Modalities: heat or ice

_____ Weeks 2-5:

- Wean from sling, d/c by 4-5 weeks
- Begin PROM exercises with gentle stretching at end ranges
- Teach home exercise program
- Scapular retraction/depression
- Postural correction
- No resisted shoulder motion until 8 weeks post-op
- Modalities: Heat before PT, ice after PT, other modalities as needed

_____ Weeks 5-12:

- Begin AROM, advance ROM as tolerated to full
- Light passive stretching at end ranges
- Begin scapular exercises, PRE's for large muscle groups (pecs, lats, etc...)
- At 8 weeks, can begin strengthening/resisted motions
- Isometrics cuff strengthening with arm at side beginning at 8 weeks

_____ Months 3-12 (if needed):

- Return to full motion
- Advance strengthening as tolerated: isometrics → bands → light weights (1-5 lbs); 8-12 reps/2-3 sets per rotator cuff, deltoid, and scapular stabilizers
- Only do strengthening 3x/week to avoid rotator cuff tendonitis
- Maintenance home flexibility and exercise program
- Sport or vocation specific rehabilitation

Comments:

_____ Teach Home Exercise Program

Modalities:

_____ Heat before _____ Ice after _____ Other _____ _____ Therapist's discretion

Signature: _____



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SURGERY ASSOCIATES, P.C.