

MENU

Radial Head Fracture Rehab Protocol

Introduction

- Indicated for non-op treatment, [Radial Head Fracture ORIF \(/radial-head-fracture-orif-24665\)](#), [Radial Head Excision \(/radial-head-excision-24130\)](#), or [Radial Head Replacement \(/radial-head-replacement-24666\)](#). Protocol must be altered based on fixation strength at surgery and surgeon preference.
- **Goal:** Regain full pain-free ROM of elbow and prevent shoulder and wrist stiffness.

Phase (0 to 14 days)

- Elbow active ROM and active-assisted ROM for flexion and extension. Goal is 15° to 105° of motion by 14 days. Avoid flexion in pronation and any valgus loads on the elbow. ROM should be performed with the arm adducted close to the body.
- Consider extension splinting per surgeons instruction.
- Putty/grip exercises.
- Isometric strengthening exercises for the elbow and wrist.

Phase II (15 days to 6 weeks)

- Continue elbow active and active assisted ROM exercises.
- Full flexion and extension ROM should be achieved by the end of 6 weeks.
- Begin active and active assisted supination and pronation.
- Begin light isotonic strengthening of flexion and extension.
- Maintain shoulder, wrist, hand strength and ROM.

Phase III (7-12 weeks)

- Continue active and active assisted supination and pronation.
- Full pronation and supination should be achieved by the end of the 8th week.
- Progressively increase isotonic strengthening in flexion/extension and pronation/supination.
- Work on any deficits.

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