



**RADIAL HEAD OPEN REDUCTION INTERNAL FIXATION (ORIF)**

**PHYSICAL THERAPY PROTOCOL**

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**Patient Name:** \_\_\_\_\_ **Date of Surgery:** \_\_\_\_\_

**Procedure: Right / Left Radial Head ORIF**

Evaluate and Treat                       Provide patient with home program

**Frequency:** \_\_\_\_\_x/week    x    \_\_\_\_\_weeks

**Immobilization:** (3-5 days post op)

**Goals:**

- Control pain and edema
- Protect fracture site with posterior splint or compression bandage
- Minimize cardiovascular deconditioning
- Maintain range in joints around the effected region (shoulder, wrist, and fingers) Prevent contractures



Patient can don/doff sling independently with elbow at 90 degrees flexion with forearm in neutral

**Intervention:**

- Modalities, such as TENS and ice, for pain control
- Splint/Sling as direct by MD
- Monitor use and weight bearing instructions per MD
- Cardiovascular conditioning
- Gentle range of motion exercises of the shoulder, wrist, and fingers
- Passive flexion/extension of the elbow
- Passive pronation/supination of the elbow

**Phase I - Maximum protection phase:** *(7 days - 3 weeks post op)*

**Goals:**

Continue to control pain and edema as needed Minimize deconditioning

Regain range of motion within pain limits Prevent muscle atrophy

**Intervention:**

- Active assistive flexion/extension with stick or pulleys
- Active assistive pronation/supination with stick or pulleys
- Cardiovascular conditioning
- Increase mobility to tolerance, prevent stiffness
- CPM

**Phase II - Moderate protection phase:** *(4-6 weeks post op)*

**Goals:**

Regain full range of motion

Actively work within newly gained range of motion Increase strength

**Intervention:**

- Active flexion/extension of the elbow
- Active pronation/supination of the elbow
- Active: flexion, extension, pronation, supination with a wand or pulleys
- Pulleys with eccentric control during flexion/extension
- Isometrics: flexion, extension, pronation, supination
- Gentle stretching using inhibition/elongation techniques or joint mobilization to increase range of motion



**Phase III - Minimum protection phase:** (12 weeks post op)

**Goals:**

- Increase strength (especially at end ranges)
- Educate patient on proper joint protection and therapeutic exercises
- Gain adequate strength in the forearm flexors and extensors to increase stability at the elbow
- Strengthen the elbow flexors and extensors to gain full range of motion
- Increase speed and control of limb movement

**Intervention:**

- Resistive exercises: standing with weights, theraband resisted (flexion, extension, pronation, supination) exercises
- Self-stretching: flexion/extension, pronation/supination, shoulder flexion/extension, and wrist flexion/extension, ulnar deviation / radial deviation
- Advance elbow extension with radial deviation and elbow flexion with ulnar deviation
- Higher speed and high intensity isotonic flexion/extension, pronation/supination while standing or performing ADLs
- Incorporate open and closed-chain exercises

**By signing this referral, I certify that I have examined this patient and physical therapy is medically necessary. This patient \_\_\_ would \_\_\_ would not benefit from social services.**

\_\_\_\_\_

**Date:**\_\_\_\_\_

**Bryan M. Saltzman, MD**