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Shoulder & Elbow Surgeon

Open Reduction, Internal Fixation of Proximal Humerus Fracture

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Detroit, MI

Phase I: (0 to 4 weeks after surgery)

Goals: Protect Repair. ensure wound healing.

1. Patients may remove dressing and shower 5 days after surgery. You may get the incision wet.
2. Sutures will dissolve on their own. No suture will need to be removed.
3. Ice is recommended to reduce swelling and help with pain. You should continue this for the first week at a minimum. Apply the ice to the surgical site 3-4 times per day once the nerve block has worn off.
4. You should maintain your sling when not performing exercises.
 - a. Initiate the following exercise program 3 times per day:
 - i. Immediate elbow, forearm, wrist, and hand range of motion out of sling . You may perform nonresistance, non-weight bearing use of the hand for activities such as typing on a computer or using a tablet computer.
 - ii. May dangle the arm to apply clothing and clean axilla.
 - iii. NO ACTIVE SHOULDER MOTION

Phase II: (4 to 12 weeks after surgery)

Goals: Initiate ROM & Protect Repair

1. You may continue sling use in public but should remove when comfortable and to begin shoulder motion .
2. No lifting weights or bearing weight on you arm.
3. Advance active assisted and passive ROM
 - a. passive and active assistive ER at the side to 30 degrees and forward flexion to 120 degrees, IR to buttock/sacrum

Phase III: (3 to 6 months after surgery)

Goal: Progress ROM and initiate strengthening.

1. May begin lifting up to 10 lbs below chest height and close to body and 5 lbs above chest height. Slow progression with goal to remove restrictions at 6 months.
2. Advance active and passive ROM in all planes to tolerance.
 - a. ER at the side, Adduction and forward elevation to tolerance
 - b. Scapular plane elevation to tolerance.
 - c. IR and extension to tolerance
3. Initiate gentle rotator cuff strengthening.
4. Initiate scapular stabilizer strengthening

Phase IV: (>6 months after surgery)

1. Continued functional strengthening.