

Post Operative Rehabilitation Protocol Following Open Elbow Surgery, Radial Head Replacement/Resection

| N | ame: | Date: |
|--------|---------|--|
| Di | iagnosi | Date of Surgery: |
| | Phase | Immediate Post Operative Phase (Week 0-1) |
| ' | • G | |
| | | Allow soft tissue healing |
| | | Decrease pain and inflammation |
| | | Retard muscular atrophy |
| | • w | k 1 |
| | | Posterior splint at 90° elbow flexion with wrist free for motion (sling for comfort) |
| | | Elbow compression dressing |
| | | Exercises Gripping |
| | | Gr.pping |
| | | Wrist ROM (passive only) Shoulder isometrics (no shoulder ER) |
| | | Shoulder isometries (no shoulder EK) |
| | Phase | -Intermediate Phase (Week 3-7) |
| | • Ge | |
| | | Restore full pain free range of motion |
| | | Improve strength, power, endurance of upper extremity musculature |
| | | Gradually increase functional demands |
| | • w | k 3-5 |
| | | Progress elbow ROM, emphasize full extension |
| | | Initiate flexibility exercises for: |
| | | Wrist ext/flexion Forearm surjustion (propostion) |
| | | Forearm supination/pronationElbow ext/flexion |
| | | Initiate strengthening exercises for: |
| | | Wrist ext/flexion |
| | | Forearm supination/pronation |
| | | ■ Elbow ext/flexors |
| | | Shoulder program (Thrower's Ten Shoulder Program) |
| | • w | k 6-7 |
| | | Continue all exercises listed above |
| | | Initiate light sport activities |
| \neg | Dhago | I Administration of the second |
| | • Go | l -Advanced Strengthening Program (Week 8-12) |
| | GC | Improve strength/power/endurance |
| | | Gradually initiate sporting activities |
| | • w | k 8-11 |
| | | Initiate eccentric exercise program |
| | | Initiate plyometric exercise drills |
| | | Continue shoulder and elbow strengthening and flexibility exercises |
| | | Initiate interval throwing program for throwing athletes |



- Goals
 - o Gradual return to activities
- Week 12

 - Week 12
 Return to competitive throwing
 Continue Thrower's Ten Exercise Program

| Comments: | • | |
|---------------------------|-----------------|--|
| Frequency: times per week | Duration: weeks | |
| Signature: | Date: | |