

# Post-Operative Instructions Proximal Humerus Open Reduction & Internal Fixation (ORIF)

# **Day of Surgery**

- **A.** Diet as tolerated.
- **B.** Icing is important for the first 5-7 days post-op. While the post-op dressing is in place, icing should be done continuously. Once the dressing is removed on the first or second day, ice is applied for 20-minute periods 3-4 times per day. Care must be taken with icing to avoid frostbite. Alternatively, Cryocuff or Game-ready ice cuff can be used as per instructions.

You will be contacted by East Coast Orthotics regarding an ice compression unit to be used after surgery. This helps with pain and swelling but typically is not covered by insurance. The cost is \$200-300 for a 2-week rental. Alternatively, ice gel packs with a shoulder or knee sleeve can be provided by the hospital for a minimal charge.

**C.** Pain medication as needed every 6 hours (refer to pain medication sheet)

## **First and Second Post-Operative Day**

- A. Continue Icing.
- B. Pain medications as needed

#### **Third Post-Operative Day**

**A.** You may remove surgical bandage and shower this evening. Apply regular bandages to these wounds prior to showering and when showering is complete apply fresh regular bandages. You will need to follow this routine for 2 weeks after surgery.

# **Physical Therapy**

**A.** Physical Therapy should begin at 6 weeks. Please call your preferred facility to make an appointment.

\*Note: Your shoulder will be very swollen. It may take a week or longer for this to go away. It is also common to notice burning around the shoulder as the swelling resolves. If excessive bleeding occurs, please notify Dr. Jazrawi.

Call our office @ 646-501-7223 option 4, option 2 to confirm your first postoperative visit, which is usually about 1-2 weeks after surgery. If you are experiencing any problems, please call our office or contact us via the internet at www.newyorkortho.com.



# Rehabilitation Protocol: Proximal Humerus Open Reduction & Internal Fixation (ORIF)

Name:	Date:
Diagnosis:	Date of Surgery:
<ul> <li>General Guidelines:</li> <li>Sling for comfort for 2 weeks post-op, start at home per</li> <li>No active abduction/external rotation x 6 weeks post op</li> <li>No RTC strengthening x 6 weeks post op</li> <li>Outpatient PT starts at 2 weeks post op</li> </ul>	
<ul> <li>Phase I (Weeks 0-2)</li> <li>Sling for comfort</li> <li>Start at home pendulum exercises 3x/day</li> <li>No active abduction/external rotation</li> <li>No RTC strengthening</li> <li>Exercises: <ul> <li>PROM of shoulder: flexion to 90 deg, ER to 30 deg,</li> <li>Scapular Clocks: Elevation, depression, retraction,</li> <li>Pendulums (Codman's)</li> <li>Incision mobilization</li> <li>Cervical, hand, wrist, elbow AROM</li> </ul> </li> </ul>	,
<ul> <li>Phase II (weeks 2-6)</li> <li>Discontinue sling</li> <li>No active abduction/external rotation</li> <li>No RTC strengthening</li> <li>Exercises: <ul> <li>Continue exercises as above</li> <li>AAROM: Flexion to 90 deg, ER to 40 deg</li> <li>Grade I-II GH and scapular mobilizations</li> </ul> </li> </ul>	
<ul> <li>Phase III (weeks 6-12)</li> <li>No restrictions at 6 weeks post-op</li> <li>Exercises:         <ul> <li>Continue exercises as above</li> <li>Pec Minor stretching to minimize scapular protraction</li> <li>Submaximal isometric RTC exercises at 6 weeks</li> <li>Progressive isotonic RTC exercises at 8 weeks, low</li> <li>Grade III-IV GH and scapular mobilizations at 8 weeks</li> <li>Posterior scapular stretching at 8 weeks if needed</li> <li>General UE strengthening at 10 weeksPhase</li> </ul> </li> </ul>	v weights, high reps eeks
Phase IV (weeks 12+)	



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- Continue exercises as above
- General upper extremity strengthening

Comments:	
Frequency: times per week	Duration: weeks
Signature:	Date: