



PROXIMAL HUMERUS FRACTURE OPEN REDUCTION INTERNAL FIXATION – REHAB PROTOCOL

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ACTIVITY

- Try and rest the first few days following surgery. **Wear your sling at all times**, including sleeping. You will be directed by Dr. Pressman as to when you may discontinue your sling. Generally, most patients will end up staying in the sling for the **first 2 weeks following surgery**.
- With the sling, you may be more comfortable sleeping in a seated position (i.e. recliner) with a pillow under your forearm for support.
- **Ice** or the **cryo-cuff** can be used as much as possible for the first 3-4 weeks to help decrease swelling. [please see “medication” section for more information on icing]
- You may remove your arm from the sling 4-5 times a day and begin the enclosed home exercises (specific instructions included in this handout) the day after surgery.
 - **Pendulum & Codman** exercises: Using gravity and momentum, gently move your arm in small, slow circles for approximately 5-10 minutes.
 - **Elbow & wrist range of motion** exercises: Gently bend and extend your elbow to help prevent stiffness.
- Do not lift any objects greater than 1 pound for the first 4-6 weeks
- Driving is not recommended for the 1st 4 weeks following surgery and contraindicated when taking narcotic pain medication.
- Return to (sedentary) work or school the day after surgery if pain is tolerable. Return to heavy labor will be determined by Dr. Pressman.

DRESSINGS

- Dressing should remain in place for 7 days. You can shower with the dressing on as it is

waterproof. After 7 days, it is okay to remove the dressing. Leave the steri-strips intact; they will fall off on their own. You can then shower with the dressing off after day 7 but do not vigorously scrub at the incision site.

- Please DO NOT BATHE, HOTTUB, OR SOAK/SUBMERGE THE INCISION IN WATER as this can increase risk of infection. Wait one month from surgery or until you are directed to do so.
- Small amounts of bloody drainage, numbness at incision site, swelling, and bruising are normal findings following surgery.
- Do not use bacitracin or any ointments under band-aids.

MEDICATION

You have been prescribed one of the following pain medications:

- Oxycodone – Please take 1 tab every 4-6 hours as needed for pain.
- Ultram – Please take 1 tab every 6 hours as needed for breakthrough pain

In addition to narcotics it is advised that you take scheduled **NSAID (non-steroidal anti-inflammatory)** and **Tylenol** (alternating) for the first three days and then as your pain gradually improves you will wean off the narcotics and take NSAID/Tylenol on an as needed basis.

- **Tylenol (Acetaminophen)** – take no more than 4,000 mg in a 24-hour period. Do not take if you have liver disease.
- **Ibuprofen (Advil)** – take no more than 2,400 mg in a 24-hour period. Do not take if you have kidney disease, history of ulcers, or GI bleeds.
- **Naproxen (Aleve)** – if you prefer this over-the-counter NSAID over Ibuprofen/Advil you may take this instead. DO NOT TAKE BOTH IBUPROFEN & NAPROXEN as this increases your risk of toxic side effects. Please take no more than 1,500 mg of Naproxen in a 24-hour period. Do not take it if you have kidney disease, history of ulcers, or GI bleeds.
- ICE – while you are resting use cryo-cuff or place cold ice packs on your shoulder for 15-20 minutes at a time. Place a clean, dry towel or pillowcase between your skin and the cold pack. Ice can be used as much as possible for the first 3-4 weeks to help decrease the swelling.
- You may have also been given a prescription for **enteric coated Aspirin 81 mg** which you should take once daily with food to decrease the risk of post-operative blood clot formation.
- You have been given a prescription for **Senokot** to take 2 tabs daily as needed for constipation. Sedation during surgery, narcotic medications, decreased fluid intake, and decreased activity all contribute to constipation. If you find that you are still constipated despite the Senokot medication, there are other over the counter medications that you can try: Miralax, Fleet

enema, or bisacodyl suppository.

- If you have any side effects (i.e. Nausea, rash, difficulty breathing) from medication discontinue its use and call our office.

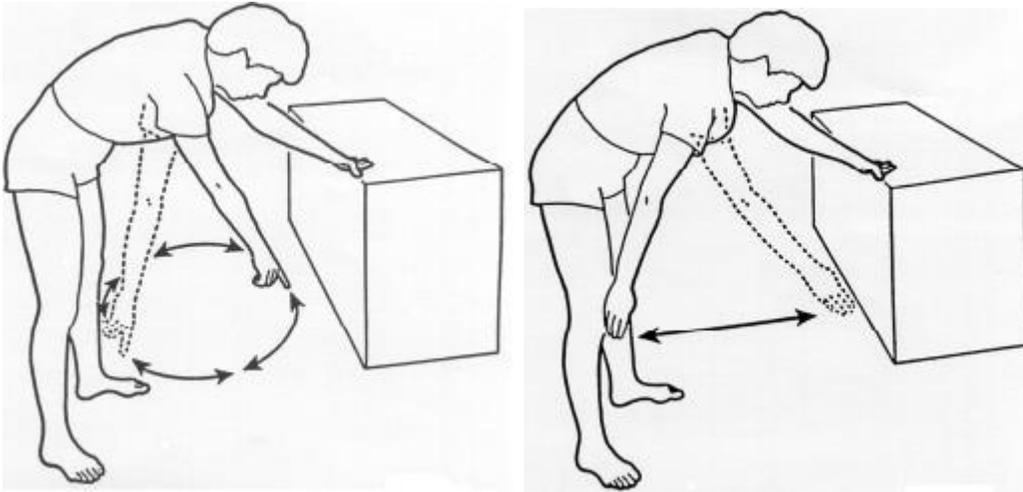
PHYSICAL THERAPY

- The need for a timing of outpatient physical therapy will be determined by Dr. Pressman and discussed at your first post-operative visit.
- Please perform your prescribed home exercises to help facilitate early shoulder range of motion and to prevent stiffness in your elbow and wrist.

FOLLOW UP

- You have likely already been scheduled for your first post-operative visit. If you have not received an appointment, please contact the office to schedule an appointment 10-14 days after your surgery.
- You will be seen by Dr. Pressman for your first post-operative visit to review your intra-operative findings and to go over any questions you may have.
- If necessary, sutures will also be removed at that time.
- Call the office immediately if you develop a fever (>101.5), chills, excessive incision drainage, calf pain, persisting arm numbness.
- If you have any questions or concerns, please feel free to call the office.

HOME EXERCISES



Pendulum's:

Stand supporting yourself on a table with your good arm. Let your other arm hang down completely relaxed and slowly move it in a circular motion both clockwise and counterclockwise. Keep your circles within the width of your feet.

Codman's:

Stand supporting yourself on a table with your good arm. Let your other arm hang down completely relaxed and slowly move it forward & back as well as side-to-side motion.

Elbow Curls:

Come out of your sling. Without any extra weight, use your good hand to help bring your other hand towards your shoulder by bending your elbow. Then slowly lower your arm back to a straight position. Then repeat.

Wrist Curls:

While in and out of your sling, make a light fist and move your operative wrist in an up and down movement slowly like you are knocking on a door.

Ball Squeezes:

While in and out of your sling, squeeze the foam ball to exercise the hand, fingers, and wrist muscles. This exercise can be very effective to help promote good circulation and prevent excessive swelling.

*** All exercises to be done for 5-10 minutes, 4-5 times a day.**