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Post-Operative Rehabilitation Guidelines for Clavicle ORIF

Weeks 0-6:

- NWB for 6 weeks, Do not elevate arm above 90° in any plane for the first 3 weeks after surgery, avoid excessive internal/external rotation
- In sling for first 4 weeks
- Weeks 1-3 → Flexion to 90° as tolerated, no horizontal adduction, no IR behind back
- Weeks 3-6 → Flexion to 120°, D/C sling at 4 weeks, Theraband exercises start
- Pendulums, scapular retraction, shoulder abduction limit to 90°

Weeks 7-12:

- Progress ROM as tolerated, progressive IR and ER as tolerated, shoulder abduction and flexion to tolerance (full by week 12)
- Wall slide, IR behind back to beltline only, horizontal adduction active reach only, standing ER, Side lying IR at 90°
- PRE 1-5 lbs as tolerated, prone T's, prone row, prone extension, side lying ER
- Initiate push-ups into wall at week 8 (push-up progression per MD)

- Avoid forceful pushing, pulling, and lifting overhead

Weeks 13-16:

- Progress to Full ROM; improve strength, NM control, dynamic stability, scapular muscular strength
- IR behind back full, ER at 90° abduction stretch
- Continue theraband exercises- add ER at 90° and IR at 90°
- Weight training can begin at 12 weeks, biceps and tricep, front pull downs, seated row, seated bench press at week 16
- Gradual return to recreational activities without force on the arm, continue to avoid forceful pushing, pulling, and lifting overhead

Weeks 16-18:

- Progressively increase activities to prepare for unrestricted return to sports based on healing and MD approval
- Pushup on unstable surface at 16 weeks, plyometric exercises for throwers- wall dribbles overhead, rebounder throws arm at side and with weighted ball, wall dribbles at 90°