



Distal Humerus Fracture Open Reduction and Internal Fixation

Patient Postoperative Instructions - Early Motion Protocol

Laith Al-Shihabi, MD

0-1 week

Pain medication:

- Use your prescription pain medication as needed to control pain.
- If your arm was numbed (blocked) for the surgery by the anesthesiologist, begin taking pain medication before the block wears off.
- Do not drive or operate machinery while taking narcotic/opioid pain medication.
- Unless you cannot take them for other medical reasons, it is ok to use over-the-counter anti-inflammatory medication (e.g. Advil or Aleve) in addition to your prescription pain medication. Do not take tylenol as your prescription already contains this medication.

Post-op Dressings:

- Keep the dressings and splint in place until your first postoperative visit.
- Elevation of the arm, along with ice on-and-off for 20 minutes at a time, will help with swelling and pain.
- It is ok to shower, but the dressings must stay clean and dry. Place a waterproof covering over the dressings while bathing or showering (such as a large heavy plastic bag that is sealed with Saran wrap).
- If the dressings get dirty, wet, or come apart please contact the office to have the dressing re-done.
- You may find it easier to sleep in a reclined position to help support your elbow.

Motion:

- Start moving your fingers as soon as possible.
- You can use your hand for light activity, such as eating, drinking, or using a computer.
- Do not lift, carry, push, or pull anything heavier than a glass of water or can of soda.

1 week (First therapy visit)

Splint:

- You will be placed in to a removable long-arm splint by hand therapy 1 week after surgery.
- The splint should be worn full-time except for therapy.

Motion:

- Therapy will be started for elbow, wrist, and hand motion.
- Continue to avoid lifting, carrying, pushing, or pulling anything heavier than a glass of water.

2-6 weeks (First post-op visit)

Splint:

- The sutures will be removed at your first postoperative visit.
- Continue use of the splint full-time when not performing therapy exercises.
- Scar massage can be started at 3 weeks post-op.

Motion:

- Gentle finger and grip strengthening with putty can be started at 3 weeks.
- Continue to avoid lifting, carrying, pushing, or pulling anything heavier than a glass of water.

6 -10 weeks (Second post-op visit)

Splint:

- Wean from the splint by 8 weeks.

Motion:

- Continue elbow range of motion, including stretching.
- Begin gentle elbow strengthening at 8 weeks.
- You can lift/carry up to 5lbs (about 1/2 gallon of milk) as your symptoms allow at 8 weeks.
- You can lift/carry up to 10-15 lbs starting at 10 weeks.
- Transition to a home exercise program at 8-10 weeks.

10-12 weeks (Third post-op visit)

Splint:

- No longer needed.

Motion:

- Continue elbow and forearm strengthening.

12+ weeks

Gradually return to light activity and exercise. There are no further activity restrictions at this time. No further therapy is necessary unless required on a case-by-case basis.