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Sports Medicine and Shoulder Service

Proximal Humerus Fracture Nonoperative Rehab Protocol Prescription

Patient Name:

Date:

Diagnosis: *Proximal Humerus Fracture R / L Shoulder*

Number of visits each week: 1 2 3 4

Treatment duration _____ weeks

Healing Phase (weeks 1-4 post injury)

Sling immobilizer may be d/c'ed after 3 weeks

Gentle shoulder PROM

Scapular "pinches"

AROM elbow and wrist

Modalities as indicated

Daily HEP

Functional Rehab Phase (4 weeks after injury)

Begin to progress weight bearing as tolerated

May progress gentle PROM

May initiate active assisted and active range of motion – progress as tolerated

Restore scapulothoracic and glenohumeral rhythm

Rotator cuff and scapular stabilizer strengthening program

Modalities as indicated

Daily HEP

Maintenance Phase

Continue all therapy exercises from previous phase

Continue strengthening program with progressive increase in resistance

Functional and ADL specific training

Phase out supervised rehab

Advance home strengthening program to be done daily

ADDITIONAL COMMENTS: _____

Concerns or questions:

Duncan (clinical nurse specialist – Dr. Kaar) at **(314) 577-8525** / email: **dmchardy@slu.edu**

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Physician Signature: