

Dr. Robert Wysocki

Olecranon Fracture Open Reduction Internal Fixation

4-5 days: The postoperative dressing is removed. Consider silicon-based scar treatments for elbow incision, stockinettes to forearm/arm for swelling.

Splint: A posterior long arm splint with elbow in 90 degrees flexion, forearm and wrist neutral is fabricated

EARLY MOTION PROTOCOL:

Motion: Active and active-assisted elbow extension, flexion and forearm pronation/supination is begun. If the therapist believes AROM is progressing slower than planned and wishes to proceed early with PROM, please contact physician. PROM usually not begun until 6 weeks.

STANDARD PROTOCOL:

Patients are maintained in the posterior mold splint for 2 weeks full time with no ROM, and then the motion protocol described above is begun.

6 weeks:

Splint: weaned over 2 weeks.

Motion: continue as above, but may now add passive motion and static progressive extension splinting is added as needed. Add gentle progressive strengthening of elbow and forearm.

8-10 weeks:

Consider work conditioning for laborers. Gradual return to full activity, sports by 10 weeks