

OLECRANON OPEN REDUCTION INTERNAL FIXATION (ORIF) Physical Therapy Protocol

Patient Name:	Date of Surgery:
Procedure: Right / Left Elbow Olecranon ORIF	
Evaluate and Treat	
Provide patient with home program	
Frequency: x/week x weeks	
Phase I (0-4 weeks): Period of protection: splint/brace (except for hygiene and PT). No active elbow extension. corresponding brace setting) within a tension-free zone.	Therapists may slowly advance elbow flexion (and

- Weeks 0-1: No formal PT. Splint without motion:
 - Splint/brace used to immobilize elbow at roughly 45 degrees.
 - Home exercises only (gentle wrist and shoulder ROM).
- Weeks 1-6: Begin formal PT. Brace with careful progressive motion:
 - Brace unlocked to allow ROM from full extension to __ degrees of flexion. Flexion setting may be increased slowly (ie. roughly 10°per week) to match whatever passive, **tension-free** extension is achieved during therapy sessions (see below). Brace should be worn at all times (except for hygiene or PT).
 - ROM: Flexion: active and gentle passive elbow flexion to ___ degrees, advancing as tolerated to a *tension-free endpoint*. Therapists may slowly increase the flexion block setting on the brace to match the tension-free flexion achieved during therapy sessions (ie. if elbow can be passively flexed to 70° without tension, brace may be reset to 70° flexion block after that therapy session). Extension: *passive-only* extension to tolerance (NO active extension). Passive forearm supination/pronation. Continue shoulder/wrist ROM.
 - Goal: full elbow extension, tension-free flexion to 120°, and full forearm supination/pronation by 6 weeks.
 - Strengthening: Cuff/periscapular/forearm isometrics in brace, within above motion limits.



Phase II (6-12 weeks): Motion is more aggressively advanced. Still no resisted elbow extension or lifting with the operative arm.	
Discontinue brace.	
 ROM: Advance active and passive elbow flexion to full (if not already achieved). Gentle passive stretching end-ranges as tolerated. Begin gentle active elbow extension (gravity only). Continue forearm supination pronation, shoulder and wrist ROM. Goal: full, tension-free elbow and forearm motion by 9 weeks. 	•
 Strengthening: Avoid resisted elbow extension until 3 months post-op. Progress cuff/periscapular and forearm isometrics → bands. Only do 3x/week to avoid cuff tendonities Modalities as per PT discretion 	5.
Phase III (3-6 months): Begin resisted elbow extension and progress to sport/occupation-specific reh	ab.
• ROM: Unrestricted active and passive stretching at end ranges as tolerated.	
 Strengthening/Activities: Continue bands, progressing to light weights (1-5 lbs), 3x/week. Begin gentle resisted elbow extension and transition to closed chain upper extremity/forearm strengthening within pain-free limits. Progress to sport-specific/job-specific exercises at 4.5 months. 	
Depending on job requirements, may resume lifting once full-strength achieved and healing adequate (usually by 6 months).	
By signing this referral, I certify that I have examined this patient and physical therapy is medically necessary. This patient would would not benefit from social services.	
Physician Name: Date:	

