

PHYSICAL THERAPY PROTOCOL

Distal Radius Fracture — Open Reduction & Internal Fixation

Volar plate (or other) fixation of the distal radius

Stable internal fixation typically allows early wrist motion. Digit, elbow, and shoulder motion begin immediately to prevent stiffness; wrist motion begins within the first 1-2 weeks, with strengthening deferred until radiographic healing.

General Precautions

- Removable splint/orthosis; keep the incision clean and dry.
- No lifting or weight bearing through the wrist until union is confirmed (typically ~6 weeks).
- Maintain full finger motion at all times to prevent stiffness.

Phase I — Digit & Early Wrist Motion Weeks 0-2

Goals

- Control swelling
- Full digit motion
- Begin gentle wrist motion

Precautions / Restrictions

- No gripping loads or wrist weight bearing
- Splint between exercises

Exercises & Interventions

- Full active finger, thumb, elbow, and shoulder motion
- Tendon gliding
- Gentle active wrist flexion/extension and forearm rotation as directed
- Edema control / elevation

Criteria to Advance

- Full digit motion
- Swelling controlled

Phase II — Wrist Motion Weeks 2-6

Goals

- Restore wrist and forearm motion
- Scar management

Precautions / Restrictions

- No resisted strengthening / lifting

Exercises & Interventions

- Progress active wrist flexion/extension, radial/ulnar deviation, pronation/supination
- Gentle stretching toward full motion
- Scar mobilization

Criteria to Advance

- Improving wrist motion
- Radiographs showing healing

Phase III — Strengthening Weeks 6-12

Goals

- Restore grip and wrist strength once healed

Precautions / Restrictions

- Strengthening begins after surgeon confirms adequate healing

Exercises & Interventions

- Progressive grip and wrist strengthening (putty, weights)
- Forearm strengthening
- Work-conditioning as needed

Criteria to Advance

- Radiographic union
- Grip strength improving toward symmetric

Phase IV — Return to Activity Months 3-6

Goals

- Return to full function

Exercises & Interventions

- Progressive strengthening
- Sport-/job-specific loading

Criteria to Advance

- Functional motion and strength
- Surgeon clearance for full loading

This protocol is a general guideline. Progression is criteria-based and may be advanced or slowed by Dr. O'Donnell based on intraoperative findings, tissue quality, fixation, and individual healing. Time frames are approximate. Direct questions to the office at (305) 393-8810.