

PHYSICAL THERAPY PROTOCOL

Olecranon Fracture — Open Reduction & Internal Fixation

Tension-band or plate fixation of the olecranon

Internal fixation stabilizes the olecranon and allows early protected elbow motion to prevent stiffness. Resisted elbow extension is avoided early because the triceps pulls directly on the fracture/fixation. Strengthening waits until radiographic healing.

General Precautions

- Splint initially; early protected motion as directed by fixation stability.
- No resisted elbow extension for ~6 weeks (protect the triceps pull on the fixation).
- Limit end-range passive flexion early per surgeon.
- No lifting or weight bearing through the arm until union.

Phase I — Early Protected Motion Weeks 0-2

Goals

- Control pain and swelling
- Begin protected motion

Precautions / Restrictions

- Active-assisted/active motion in allowed range
- No resisted extension
- No weight bearing through arm

Exercises & Interventions

- Active-assisted elbow flexion/extension within limits
- Forearm pronation/supination
- Shoulder/wrist/hand motion
- Edema control / elevation

Criteria to Advance

- Wound healing
- Motion improving

Phase II — Active Motion Weeks 2-6

Goals

- Restore full active elbow and forearm motion

Precautions / Restrictions

- No resisted extension
- No lifting

Exercises & Interventions

- Active elbow and forearm motion to full
- Scar management

- Continue adjacent-joint motion

Criteria to Advance

- Full active motion
- Radiographs showing healing

Phase III — Strengthening Weeks 6-12

Goals

- Restore strength once healed

Precautions / Restrictions

- Strengthening begins after surgeon confirms healing

Exercises & Interventions

- Progressive resistive elbow (including extension) and grip strengthening
- Gentle terminal-range stretching for stiffness

Criteria to Advance

- Radiographic union
- Strength improving

Phase IV — Return to Activity Months 3-6

Goals

- Return to full function

Exercises & Interventions

- Progressive strengthening
- Sport-/job-specific tasks

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.