

Rehabilitation Protocol: Clavicle Fracture Repair

Phase 1 (Weeks 0-2)

- Sling worn for support except for hygiene
- Remove sling regularly throughout the day to work on elbow range of motion
 - Important to move elbow to avoid stiffness there
- **Therapeutic Exercises:**
 - Avoid significant shoulder motion during this time
 - Active/Passive elbow & wrist range of motion
 - Shoulder shrugs, scapular retraction without resistance

Phase 2 (Weeks 2-6)

- **Sling:** Discontinue sling 2 weeks after surgery
- **Range of Motion:** Active, Active-Assist, and Passive shoulder ROM as tolerated
- **Therapeutic Exercises:**
 - 1 lb. lifting restriction with operative arm
 - Active/Passive range of motion to all upper extremity joints
 - Shoulder isometrics with the arm against the body
 - Stationary bicycle/trainer
 - May jog once more comfortable (avoid uneven terrain)

Phase 3 (Weeks 6-10)

- **Range of Motion:** Unrestricted motion
- **Therapeutic Exercises:**
 - Advance to gradual weightbearing/resistance as tolerated to the operative arm
 - Therabands, transitioning to light weights over time
 - Elliptical trainer
- Return to outdoor road bicycle riding, running
 - Avoid mountain biking, trail running, climbing, skiing/snowboarding activities

Phase 4 (Starting Week 10)

- Progress to full weightbearing/lifting with the operative arm
- Okay to return to trail running
- Once cleared by Dr. Gross, may return to team sports, mountain biking, climbing, skiing/snowboarding, etc. (usually no earlier than Week 12)