**C. Lucas Myerson, MD**
Shoulder and Elbow Surgery
Northwell Health - Greenwich Village, Hudson Yards and Lenox Hill
Phone: 646-655-6784  Fax: 646-665-6791

# PT Protocol - Non-Operative Two-Part Proximal Humerus Fracture

## Phase I (Protection Phase): Weeks 0–4

### Precautions

- Remain in sling for 4 weeks.
- Avoid pushing up from a chair or bed with the injured arm.
- No active shoulder motion and no forceful passive stretching beyond limits described.
- No resisted internal rotation, no reaching behind the back into IR, no abduction with IR, and no ER stretching at 90° abduction.
- No resisted shoulder movements until 8 weeks post-injury.
- All therapist-supervised passive exercises should be performed in supine position to relax the shoulder and minimize cuff activation.
- Avoid use of body blade, weights, or upper body ergometer during this phase.

### ROM Goals

- Therapist-supervised PROM only.
- Forward flexion to 90° (supine, elbow bent to 90°, in scaption).
- External rotation to 30° (supine, towel under elbow).
- Abduction up to 60° without rotation, elbow bent.
- Pendulum hangs (only if performed correctly).
- Active hand and wrist exercises.
- Scapular pinches, rolls, and shrugs.
- Avoid canes/pulleys until 4–6 weeks (these are active-assist).

## Phase II (Active Range of Motion Phase): Weeks 5–8

### Precautions

- Do not lift more than the weight of a soda bottle.
- Face the pulley directly; avoid pulleys behind the back.
- Avoid sudden jerking or grabbing motions.

### Exercises

- Discontinue sling.
- Introduce pulleys and canes for ROM work.
- Progress from active-assisted to active ROM (IR, ER, scapular rotators). Start supine, then advance to sitting/standing.

- Begin scapular strengthening and closed-chain deltoid work.
- Progressive resistance exercises (PREs) for large muscle groups (pectoralis, latissimus) starting at 8 weeks.
- Isometrics with arm at side and light theraband resistance at 8 weeks.

## Phase III (Strengthening Phase): Weeks 9–16

### Precautions

- Full ROM should be achieved without substitution patterns and with good scapulothoracic mechanics.
- No heavy lifting (>10 lbs).
- Face the pulley directly; avoid pulleys behind the back.
- Avoid sudden jerking motions or grabbing objects outstretched.
- Lateral and side raises with weights should be below shoulder height and with elbows bent.

### Exercises

- Advance to full ROM as tolerated with gentle passive stretching at end ranges.
- Progress scapular strengthening and closed-chain deltoid exercises.
- Continue PREs for large muscle groups.
- Isometrics with theraband resistance, progressing to bands and then light weights (1–5 lbs).
- Strengthening for rotator cuff, deltoid, and scapular stabilizers.
- Limit strengthening sessions to 3x/week to prevent tendonitis.
- Add eccentrically resisted exercises and proprioceptive drills.

### Modalities

- Heat and Ice, Ultrasound, Iontophoresis, Phonophoresis, Therapists' discretion, TENS, Trigger point massage

### Evaluation and others

- Teach home exercise program

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**www.lucasmyersonmd.com**