

Surgical Management of Clavicle Fracture

Clavicle fractures generally take 6-8 weeks to heal. Severity of clavicle fractures can vary and affect time to healing and stability of the repair. The rehab protocol below relates to fractures that have a strong and stable surgical repair. Less stable fractures may require more protection and a less aggressive protocol.

Phase I – 0-4 weeks

Immobilization: Sling immobilizer / brace with 15 degrees abduction x 4 weeks. Wear continuously except for therapy, HEP and hygiene/bathing.

Restrictions: No strengthening. Avoid aggressive stretching.

Exercises:

- Gripping Exercises
- Elbow, wrist and finger range of motion
- Shoulder pendulums
- PROM/AAROM/AROM for shoulder tolerable discomfort. Instruct on HEP to perform twice daily. Modalities used as needed.

Phase II – 4-8 weeks

Immobilization: None.

Restrictions: No strengthening until fracture healing. Avoid pain, stretch to tolerable discomfort only.

Exercises:

- Gradually increase PROM exercises while avoiding pain
- Modalities used as needed

Phase III – 8-12 Weeks

Immobilization: None.

Restrictions: Exercise advancement should be gradual and in slow increments while avoiding pain. If patient develops pain, drop back to early phase of rehabilitation until pain free.

Exercises:

- Continue with shoulder PROM, AAROM and AROM (goal is 85% or greater of normal PROM by 12 weeks).
- At 8 weeks begin shoulder isometric strengthening with arms at side (IR, ER, scapular stabilization).
- At 10 weeks add shoulder resistance strengthening exercises. Progression should be gradual and in slow increments while avoiding pain.

Phase IV – 12-26 weeks

Immobilization: None.

Restrictions: No specific restrictions. Patient's ROM, strength and endurance should be advanced progressively while avoiding pain.

Exercises:

- ROM should be returning to normal, if not, continue to address with stretching and HEP
- Progressive upper body strengthening may be more aggressive after 16 weeks
- Add plyometric training for athletes at 18 weeks
- Add exercises simulating work requirements at 18 weeks as part of return to work program

Phase V – 26+ Weeks

Goal: Restore normal shoulder function and progress to return to sport or return to work.

Restrictions: No specific restrictions. Advance progressively while avoiding pain. If the patient develops pain they are to return to earlier stage of rehabilitation.

Exercises:

- Aggressive upper body strengthening with initiation of plyometric training and sports or work specific training
- Consider work conditioning program based on patient's job requirements and patient motivation

