| HEALTH |
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| UNIVERSITY OF UTAI |

| Name: | | Date of Birth: | | | |
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| Diagnosis: | Glenoid Fracture | Code:S42.14 | | | |
| Procedure: | ORIF Glenoid | Surgery Date: | | | |

In order for University of Utah Health Care to complete this referral, please fax the patient's first consult notes to the University of Utah Orthopaedic Center at 801-581-4404. Thank you.

Timing of each phase varies based on individual patient factors, length of time immobilized, strength/ROM status, and expected performance/activity demands.

Phase I: Protect Repair (0 to 6 weeks after surgery)

- OK to shower immediately over clear waterproof dressing
- Sutures are all underneath the skin and will dissolve on their own
- Ice is encouraged for the first week and should be used 3-4 times a day
- Sling should be in place when not performing exercises
- Initiate exercise program 3 times per day:
 - o Immediate elbow, wrist, and hand range of motion out of sling
 - OK to start scapular stabilizer strengthening at 4 weeks

Phase II: Progress ROM & Protect Repair (6 to 12 weeks after surgery)

- Discontinue sling
- Lifting restriction of 5 lbs with the surgical arm
- Advance active and passive ROM:
 - ER at the side and flexion to tolerance
 - Scapular plane elevation to 130 degrees
 - o Internal rotation and extension to tolerance
- Initiate gentle rotator cuff strengthening, except internal rotation
- Continue scapular stabilizer strengthening
- AVOID combined abduction and external rotation
- AVOID active or resistive internal rotation

Phase II: Full Function (3 months after surgery)

- Begin combined abduction at external rotation and capsular mobility
- Discontinue lifting restrictions
- Begin subscapularis strengthening
- Advance rotator cuff and scapular stabilizer strengthening
- Initiate functional progression to sports specific activities at 4 months.

Modalities per Therapist Freq: 1-3x/week Duration: 8-12 weeks

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