



# Indiana University Health

IU Health Physicians Orthopedics & Sports Medicine

# SIMPLE ELBOW DISLOCATION (NON-OP)

## NON-OP PHYSICAL THERAPY PROTOCOL

# Bryan M. Saltzman, M.D.

Indiana University Health Physicians
Assistant Professor of Orthopaedic Surgery, Indiana University
Sports Medicine, Cartilage Restoration, Shoulder/Elbow
IU Health Methodist Hospital – 1801 N Senate Ave, Indianapolis, IN 46202
IU Health North – 201 Pennsylvania Pkwy #100, Carmel, IN 46280
317-944-9400

www.bryansaltzmanmd.com

Patient Name:	<u>Date</u> :
<u>X</u> Evaluate and Treat	_X_ Provide patient with home program
Frequency: <u>2-3</u>	x/week x <u>6</u> weeks

This protocol provides you with general guidelines for the rehabilitation of the patient undergoing nonsurgical treatment of an elbow dislocation. A hinged elbow brace will be provided.

#### Phase 1: Weeks 1-2

Goals:

- Keep elbow stable
- Decrease pain and inflammation



• Protect injured tissues

#### Intervention:

- Shoulder, Wrist, and hand ROM/stretching
- No elbow motion

### Phase 2: Weeks 3-4

#### Goals:

• Keep elbow stable but begin ROM of the elbow

#### Intervention

- PROM and AAROM but blocked to 30 degrees of full extension
- Isometrics for wrist, elbow and shoulder
- Pain and inflammation control cryotherapy, ultrasound, TENS, soft tissue mobilization, etc

### Phase 2 - Weeks 5-8

#### Goals:

- Normalize ROM, regain strength and function
- Control residual edema and pain

#### Intervention:

- Active full ROM without extension block
- Isometric exercises progressing to resisted exercises
- Joint mobilization, soft tissue mobilization or passive stretching

By signing this referral, I certify that I have examined this patient and physical therapy medically necessary. This patient wouldwould not benefit from social services.		
	Date:	
Bryan M. Saltzman, MD		