

Physical/Occupational Therapy Prescription

Name:

Date of Birth:

Diagnosis: Proximal Humerus Fracture C

Code: S42.20

Date of Injury:

Instructions: PT to eval and treat

Range of motion:

- Begin passive range of motion and Codmans of the shoulder in ER with the arm at the side and forward flexion only. Limits are 130 degrees Forward flexion and 30 degrees ER for 2 weeks

- After 2 weeks from start of PT then ok to begin AAROM and AROM To full Range of motion in all planes. -Ok to use the arm and extremity for light ADLs. No lifting

Strengthening:

Begin strengthening at 8 weeks from Injury date Strengthening of rotator cuff, scapular stabilizers, and deltoid progressing slowly from isometrics with the arm at the side to bands to weights Do not strengthen more frequently than three times per week to avoid tendonitis.

Limitations: Progress as tolerated

Modalities: Heat before and ice after therapy.

Frequency: 2-3 times/week

Duration: 6 weeks

Signature:

Date:

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