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Post-Operative Clavicle Fracture Surgery: Post-op Instructions and Recovery Timeline

Post-op Instructions:

Post-Op Instructions Following Clavicle Fracture Surgery:

1. Dressing/Sling Care:

- Leave the bandage on the incision for 5 days after discharge- then remove.. If the bandage becomes wet you should remove it. If it becomes saturated with blood- contact Dr. Pancio's office ASAP.
- Under the bandage your incision is closed with absorbable sutures (no sutured need to be removed). There is a plastic strip glued over the top of the incision helping to seal the wound. This strip will gradually start to fall off over the first 3 weeks after surgery. If it is not completely off by 3 weeks after surgery you -may gently peel it off at that point (do not peel it off before then).
- Keep the incision clean and dry. DO NOT put any ointments or bacitracin on the incision.
- Your arm will be in a sling after surgery. This is to remain in place unless you are doing your exercises (see below) or showering after surgery. At your return visit with Dr. Pancio he will instruct you when you can discontinue the sling. The sling helps protect the incision and prevent early shoulder motion which can adversely affect healing of the fracture.
- You may shower on post-op day #3. YOU MUST COVER THE DRESSING with plastic wrap and secure it to the skin with tape. Getting the wound wet can lead to breakdown and infection of the incision. Do not soak the arm in water. Do not go swimming in the pool or ocean.

2. Weight Bearing: You will be non-weight bearing on your operative arm after surgery.

3. Activity/Exercises:

- Swelling and discoloration around the incision are common after surgery. You may find it more comfortable to sleep in a recliner or propped up with pillows immediately after surgery.
- Home Exercises (PERFORM 2-3 times a day starting 2 days after your surgery)
 - Shoulder Pendulum exercise
 - Scapular Tightening/Retraction
 - Hand/Wrist/Elbow range of motion exercises
 - Grip strengthening

4. **Ice:** You should ice your shoulder as often as possible for 20 minutes at a time after surgery. Take care to not get the splint wet
5. **Medications:**
 - a. Pain Control: It is ideal to stagger taking these medications for optimal pain control.
 - i. Acetaminophen 500mg by mouth every 6 hours as needed for mild pain. Do not exceed 3000mg/day.
 - ii. Oxycodone 5-10mg (1-2 tab) by mouth every 4 hours as needed for moderate to severe pain
 1. This is a narcotic pain medicine. These types of medications can cause numerous side effects including nausea, constipation, sedation and confusion. Narcotic pain medication should only be used for 5-10 days after surgery. You should not drive while taking narcotic pain medication.
 - b. Additional Medications
 - i. Senna 8.6mg by mouth and Colace 100mg by mouth daily while taking Narcotic pain medicine after surgery to help prevent constipation
 - ii. Benadryl 25mg by mouth every 8 hours as needed for itching
 - iii. Zofran 4mg oral dissolvable tablet every 8 hours as needed for nausea/vomiting
 - iv. Vitamin D 800 IU Daily
 - v. Calcium 1200mg daily
6. **Diet:** Begin with liquids and light foods (jello, soup, etc). Progress to your normal diet if you are not nauseated.
7. **Follow up appointment:** A follow-up appointment should be scheduled for you 10-14 days after surgery. If you didn't receive an appointment, or if you need to change your appointment time, please call our scheduling secretary at: **540-667-9252**.
8. **Problems:** If you develop severe pain, a fever greater than 101.5, redness or thick, yellow drainage from the surgical incision site, excessive bleeding, redness or painful calf, or persistent nausea and vomiting please call my office.

Monday through Friday: 8 a.m. to 5 p.m.

540-667-9252: Dr. Pancio's Secretary

Weekends and Evenings

540-536-8000: Clinic operator, and ask for Dr. Pancio's team.

Phase 1: Weeks 0-3 after surgery

GOALS:

1. Control pain and swelling
2. Protect the clavicle fracture repair
3. Allow wound healing
4. Begin gentle early shoulder motion

ACTIVITIES:

- Sling at all times (including sleeping) unless doing exercises (below)
- Home Exercises (PERFORM 2-3 times a day starting 2 days after your surgery)
 - Shoulder Pendulum exercise
 - Lean forward and passively swing the arm.
 - Scapular Tightening/Retraction
 - Hand/Wrist/Elbow range of motion exercises
 - Grip strengthening, ball squeeze
- DO NOT lift your arm at the shoulder using your muscles.

Phase 2: Weeks 4-6 after surgery

GOALS:

1. Protect the clavicle fracture repair
2. Gain further shoulder range of motion
3. No weight bearing >3 lbs, no strengthening in operative shoulder

ACTIVITIES:

- Sling during daytime only
- Home Exercises (PERFORM 2-3 times a day)
 - Passive shoulder range of motion
 - Passive means using your other arm to assist or having someone else move the shoulder for you
 - a. External Rotation to 30 degrees
 - b. Forward Elevation to 90 degrees
 - Scapular Tightening/Retraction
 - Hand/Wrist/Elbow range of motion exercises
 - Grip strengthening, ball squeeze
- Avoid excessive reaching and external/internal rotation for the first 6 weeks.

Phase 3: 6 to 12 weeks after surgery

GOALS:

1. Referral to PT
2. Begin active assistive range of motion and passive range of motion to tolerance
3. Gain further shoulder range of motion
4. Begin gentle isometric strengthening

ACTIVITIES:

- Discontinue sling/immobilizer
- PT 2 x a week
- Exercises (PERFORM 2-3 times a day)
 - Active assisted exercises
 - External rotation to 45 degrees
 - Forward elevation to 120 degrees
 - Scapular stabilization
 - Resistive isometric exercises for scapular stabilizers, biceps, triceps
 - Theraband exercises
 - Deltoid and rotator cuff isometric exercises starting at 8 weeks

Phase 4: 3-6 months after surgery

GOALS:

1. Shoulder strengthening
2. Regain full range of motion

ACTIVITIES:

- Exercises
 - OK to begin polymetric or throwing program
 - Gradually increase resistance and strength training with PT
 - Emphasize endurance activities
 - Strengthening of rotator cuff and scapular stabilizers