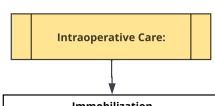
Inclusion criteria:

• Otherwise healthy children > 8 years of age

Exclusion criteria:

- · Child with:
 - Medial epicondyle fracture with distal humerus fracture
 - Comorbidities, social or behavioral concerns for which atypical therapy plan is anticipated



Immobilization

- Immobilize at 90 degrees elbow flexion
- Up to 2 weeks of immobilization in posterior splint, cast, or hinged-elbow



Postoperative Care: Discharge Education/Follow-Up/Therapy Plan

Discharge Education

- Immobilization must remain in place until first follow-up
- · Keep cast or splint clean and dry until seen for follow-up
- · Take pain medication only as directed
- Provide HEP handout to family

Home Exercise Plan (HEP)

- Begin the following exercises on day 1 after surgery, 2-3 times per day:
 - Open and close hand: 2 sets x 20 reps
 - Fingertip touches (working thumb to all fingers): 2 sets x 20 reps each
 - Shoulder blade squeeze: 2 sets x 20 reps holding 5 seconds each rep
- · Focus on healthy posture (sitting or standing up straight, shoulders back, feet flat on the floor)

Postoperative Follow-up

- Schedule initial follow up appointments (note both appointments should be scheduled at the same time to avoid delay in starting therapy):
- Ortho Clinic visit for 2 weeks post-op
- PT & OT visit for 14-21 days post-op (immediately after ortho clinic visit)
- If the surgeon elects to utilize a hinged elbow brace, provide hinged elbow brace upon discharge if available. Otherwise, order from hanger to be available at post-op therapy
- Guidance for scheduling therapy visits:
 - Sports Physical Therapy or Occupational **Therapy**
 - Consider referral to sports physical therapy for patients > 10 years of age who are involved in upper extremity dominant sports

Postoperative Therapy Progression

- Weeks 0 2, immobilization:
 - Goal is to transition to hinged elbow brace or out of immobilization altogether by 2 weeks post-op
- Weeks 2 6, brace settings*:
 - Open hinged elbow brace at discretion of therapist
- Hinged elbow brace X 6 weeks
- * If patient is not meeting range of motion (ROM) targets, notify surgeon

General Expectations

- Therapy frequency and duration of care is typically 1-2 times/week for 8-12 weeks based on patient goals, progress, and clinician judgment
- Return to activity varies based on therapy progression
- Goal is full active ROM at 6 weeks