

Total Elbow Arthroplasty Rehabilitation Program

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Diagnosis: Right / Left total elbow replacement _____

Date of Surgery: _____

Goals: To achieve a pain free functional elbow. Functional range of motion is considered: 30-120 degrees of flexion and 60 degrees of pronation and supination.

General:

- Staples Discontinued POD#14
 - Apply steristrips
- May shower POD # 5
- No baths, pools or hot tubs for one month
- No lifting of objects greater than ten pounds for LIFE
- Ice to elbow for 15 minutes per hour TID
- Gauze to wound daily
- Instruct patient to avoid excessive pressure on incision

Inpatient: Days 0-3

- Arm splinted in full extension
- AROM of fingers
- Active assistive flexion, pronation and supination
- Minimize Swelling

Outpatient Phase I: Weeks 0-4

- **No active elbow extension!**
 - Extensor mechanism must be allowed to heal

- Do not use operated arm to rise from a chair
- Passive/gravity assisted elbow extension to 0 degrees
- Active assistive elbow flexion to 100 degrees
- No aggressive or forced flexion
 - Must maintain extensor mechanism integrity
- Active/Passive Pronation and supination to tolerance
- Non Weight Bearing on the operated side
- Sling when ambulating
- Elbow brace locked in full extension at night
- No brace or sling at rest during the day
- AROM of shoulder, wrist and hand
 - Active Assistive Shoulder forward elevation and external rotation
- No aggressive grip strengthening
- No PRE for wrist
- Minimize edema

PHASE II: Weeks 4-8

- Continue Shoulder, finger and wrist ROM
- Biceps Strengthening @ Week 6
 - Perform with elbow supported
- Active elbow extension
 - Against gravity only @ week 6
- Discontinue Sling
- Discontinue nighttime splinting/ bracing
- Isometric wrist strengthening

PHASE III: Weeks 8-12

- Active Range of motion all planes
- UBE
- Antigravity elbow extension
 - No resistance

IMPORTANT FACTS:

No repetitive lifting greater than 2 pounds, and no lifting greater than 10 pounds in a single event, permanently.

Because you now have a joint made of artificial material, *any infection needs prompt treatment to avoid spread into the artificial joint.* Antibiotics must be taken whenever you will have any operation, scope (bladder, colon, etc.), or other invasive medical or dental procedure. This will remain true for the rest of your life, even for simple procedures like having your teeth cleaned. Please remind all doctors and dentists in the future that you need to have antibiotics because of your joint replacement.

Recommended antibiotics:

2 g Amoxicillin, 1 hour prior to dental or colonoscopy procedure (one dose only).

**OR, if you are allergic to Penicillin,
Cipro 750 mg, 1 hour prior to procedure (one dose only).**