

Patient:

Date of Surgery: \_\_\_

# Procedure: Right/Left Terrible Triad Reconstruction

**Week 1:** No formal PT. Splint and sling for 1 week to be removed either in PT or with MD guidance.

## AVOID ANY VALGUS UNTIL 3 MONTHS POST-OP

#### Phase I (1-6 wks): Period of protection

Weight bearing: <2 lb weight limit, ok for ADL use below this limit. Brace: Hinged brace unlocked at all times except hygiene. (MD lock brace terminal 20-40 degrees of extension for first 3 weeks in extremely unstable fractures)

**Ice:** Not directly on skin, recommend as much as possible. 5x/day, 20 min/session for first 2 weeks. Then after activity at minimum.

**ROM:** PROM $\rightarrow$ AAROM $\rightarrow$ AROM, goal of full by 6 weeks. Avoid valgus. **Exercises:** Gentle hand, wrist, and shoulder stretching, isometric strengthening of upper extremity. AVOID WRIST EXTENSION

#### Phase II (7-12 wks): Advancing activities

Weight bearing: Progress slowly to full over 6 weeks. Avoid impact activities Brace: Discontinued

**ROM:** Full, no limitiation. Add in gentle end range stretching if motion not obtained.

**Exercises:** Advance strengthening exercises in phase I to resistive, maintain flexibility/ ROM, begin gentle active wrist extension exercises. Avoid valgus until 3 months postop.

## Phase III (12-16 wks): Begin more aggressive strengthening

Weight bearing: Full

Brace: None

ROM: Full

**Exercises:** Grip strengthening, cuff and periscapular strengthening. Advance slowly to full, ok for activity specific training starting at 12-16 weeks if progressing well.

Frequency: \_\_\_\_\_\_x/week x \_\_\_\_\_weeks

By signing this referral, I certify that I have examined this patient and physical therapy is medically necessary.

Date:\_\_\_\_\_

Dax Varkey MD, MPH