

ROBERT PETTIT, MD

Restoring Function. Maximizing Performance.

ORTHOPAEDIC SPORTS MEDICINE · BEACON ORTHOPAEDICS & SPORTS MEDICINE

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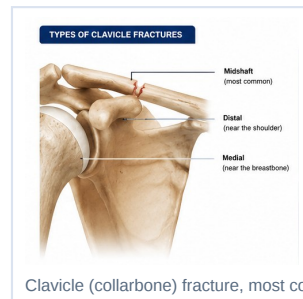
(513) 354-3700

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UPPER EXTREMITY CONDITION

Clavicle Fracture

Collarbone Fracture — Patient Condition Guide



OVERVIEW

A clavicle (collarbone) fracture is a break in the bone connecting the breastbone to the shoulder blade, commonly caused by a fall onto the shoulder or a direct blow, frequent in cycling and contact sports.

ANATOMY

The clavicle sits just under the skin and links the arm and shoulder to the trunk. Most fractures occur in the middle third of the bone, where it is thinnest and least supported by surrounding muscle.

SYMPTOMS

- Pain and swelling over the collarbone
- A visible bump, deformity, or tenting of the skin
- Difficulty raising the arm
- Bruising that spreads over the following days

DIAGNOSIS

X-rays confirm the fracture location, pattern, and degree of displacement, which are the main factors used to decide between surgical and non-surgical treatment.

TREATMENT OPTIONS

Many clavicle fractures, especially those with minimal displacement, heal well in a sling without surgery. Fractures that are significantly displaced, shortened, or comminuted are often treated with plate fixation (ORIF) to restore length and alignment and support a faster return to activity.

RECOVERY TIMELINE

- Weeks 0–6: sling immobilization
- Weeks 6–12: progressive motion and light strengthening

- Months 3–4: return to most daily activities
- Months 4–6: return to contact sport

FAQS

Q Do all clavicle fractures need surgery?

No — many heal well with a sling alone; surgery is generally reserved for significantly displaced or shortened fractures.

Q How long will I wear a sling?

Typically around 4–6 weeks, though this varies with fracture pattern and treatment.



SCAN FOR THE LATEST VERSION ONLINE

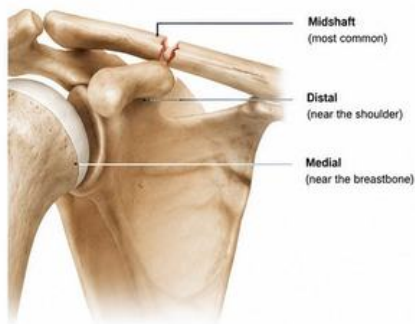
robertpettitmd.com/handouts/clavicle-fracture.pdf

This handout is for general patient education and does not replace personalized medical advice. Always follow the specific instructions given by Dr. Pettit and your care team.

CLAVICLE FRACTURE

A clavicle fracture is a break in the collarbone, the long bone that connects your arm to your body. These fractures are common and can occur from a fall, direct blow, or athletic injury.

TYPES OF CLAVICLE FRACTURES



X-RAY EXAMPLE



Midshaft clavicle fracture

COMMON SYMPTOMS

- Pain over the collarbone
- Swelling and bruising
- Visible bump or deformity
- Pain with shoulder movement
- Weakness or difficulty lifting the arm

TREATMENT OPTIONS

NON-SURGICAL (Most fractures)

- Sling for comfort (typically 2-4 weeks)
- Ice and anti-inflammatory medication
- Gentle shoulder and elbow range of motion as pain allows
- Physical therapy to restore strength and motion
- Healing typically occurs in 6-12 weeks

SURGICAL (ORIF)

- For displaced, shortened, or comminuted fractures
- For open fractures or skin compromise
- For high-demand athletes or laborers
- Fixation with plate and screws to promote reliable healing and allow earlier return to function

SURGICAL TREATMENT: OPEN REDUCTION AND INTERNAL FIXATION (ORIF)

For displaced fractures or in active patients, surgery may be recommended to realign and stabilize the bone using a plate and screws.



Arthrex Clavicle Plate

Low-profile precontoured plate anatomically designed for the clavicle to promote optimal stability and healing.



POST-OPERATIVE X-RAY (ORIF)



TYPICAL INCISION

Incision is made along the top of the clavicle. Scar will fade over time.

RECOVERY AND RETURN TO ACTIVITY (GENERAL TIMELINE)



0 - 2 WEEKS

Sling for comfort
Ice, rest, and gentle movement of hand, wrist, and elbow



2 - 6 WEEKS

Begin passive and active-assisted shoulder motion
Light daily activities



6 - 12 WEEKS

Progressive physical therapy
Gradual strengthening
No heavy lifting



3 - 6 MONTHS

Return to full activity and sports as strength and motion allow

POTENTIAL COMPLICATIONS

- Infection
- Nerve or blood vessel injury (rare)
- Nonunion or delayed union
- Hardware irritation or prominence
- Need for hardware removal (in some cases)

i Every patient and fracture is unique. Your treatment plan will be tailored to your specific injury, goals, and activity level. Follow your surgeon's instructions for the best outcome.

For patient education; your anatomy may differ.