**Conserving normal range of elbow motion post extensive posterior approach for fixing a distal intra-articular humerus fracture.**

**Introduction**: Regaining normal range of joint movement is the second most important goal following the aim of union of any intraarticular fracture. This is only achieved by reestablishment of joint line via proper joint exposure; which include a wide tissue dissection and sometimes certain osteotomy. There are many approaches for distal intra-articular humeral fractures: triceps-splitting, triceps-reflecting, triceps-reflecting anconeus pedicle and olecranon osteotomy (which was chosen as the best option for this purpose). **Method:** twelve patients (10 males and 2 females) had been enrolled in this prospective cohort from 2015 to 2023; age ranging was 17-62 years. Three patients had type B AO/OTA Fracture while 9 had type C. All fractures approached posteriorly via olecranon osteotomy after isolation and taping of ulnar nerve. Eight fractures fixed with double column anatomical plates, one with two AO regular plates, one with single column anatomical plate and two with screws. Active Elbow movement started immediately post operatively. **Results**: All fractures get union within 12-14 weeks with full range of elbow movement apart of one case of 10 degrees limitation of full extension. **Conclusion:** this approach ensures maximum visualization on fracture fragments and has minimal consequences on extensor mechanism, resulted in good union and near normal range of elbow.