UCL Reconstruction Protocol



Name:		Date:	
Diagnosis:			
Date of Surgery:	Frequency:	times per week Duration:	weeks
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Week 1:

- » Elbow is immobilized in the Bledsoe Brace at 75° flexion (7-10 days) with wrist free but in sling
- » Dressing changed at 7-10 days after surgery

Week 2-3:

- » Begin active ROM in the brace
- » Brace adjusted to 15° (locked) extension to full flexion
- » Grip strengthening in brace
- » Heat before PT; ice after PT

Week 4:

- » Discontinue the use of the Bledsoe Brace
- » Shoulder and elbow ROM, PROM→AAROM→AROM, advance as tolerated
- » Begin muscle strengthening exercises for wrist, forearm, elbow, and shoulder
- » Advance strengthening as tolerated (avoid aggressive weightlifting until 12 weeks after surgery, especially chest flies or other lifts that directly stress the ligament)
- » Total body conditioning / aerobic training may begin

Month 4 to 6:

- » May begin an interval throwing program progressing from 45 ft
- » Pitchers are not asked to throw past 120 ft, infielders are asked not to throw past 150 ft
- » The player may progress from one distance level to the next when the following criteria are met:
 - There is no pain or stiffness while throwing
 - · There is no significant pain or stiffness after throwing
 - Strength is good throughout the final set with little fatigue
 - The throwing motion is effortless and fundamentally sound
 - · Accuracy is consistent and throws are online
- » For pitchers, the mound program begins at the completion of the 120 ft level
 - The catcher is initially moved forward but throwing with a pitching motion is reserved for the mound
- » No flat ground pitching is allowed
- » Incorporate "Thrower's Ten" program into rehabilitation

Months 7-8:

- » Gradually progress throwing program to return back to competitive sport
- » Continue with overall strengthening and conditioning program

Months 9-12:

- » Return to competition is permitted when the following conditions are met:
 - Trunk, scapula, shoulder, and arm muscle strength and balance have returned to normal
 - There is no pain while throwing
 - Throwing balance, rhythm, and coordination have been reestablished

Additional:	
☐ Teach HEP ☐ Work Hardening/Work Conditioning ☐ Functional Capacity Evaluation	
Modalities:	
\square lce or cryotherapy before/after \square Heat before/after \square Electric Stimulation \square TENS \square UI	trasound
☐ Trigger points massage ☐ Dry needling ☐ Therapist's discretion	
Signature: Date:	

Want to learn more? Find relevant videos, animations, and research material by orthopaedic surgeon Dr. Anthony Romeo at **anthonyromeomd.com**.

