



From the office of:  
**Andrew J Blackman, MD**  
Bone & Joint Specialists of Chesterfield  
121 St Luke's Center Drive, Suite 302  
Chesterfield, MO 63017  
(p) 314-523-2595 (f) 314-590-5947

## Ulnar Collateral Ligament Reconstruction Physical Therapy Protocol

### Phase I: Weeks 1-3

- Goals
  - Protect healing tissues
  - Decrease pain/inflammation
  - Prevent muscle atrophy
  - Initiate elbow ROM
- Precautions
  - AVOID VALGUS FORCE ACROSS ELBOW
  - Week 1 – splint immobilization full-time
  - Week 2 – Hinged brace with ROM 30-100
  - Week 3 – Hinged brace with ROM 15-110
- Exercises
  - Gentle AROM/AAROM of elbow & wrist
  - Week 2– begin sub-maximal shoulder/elbow/wrist isometrics except shoulder IR
  - Scapular stabilization
  - Walking & stationary bike OK with brace on

### Phase II: Weeks 4-8

- Goals
  - Gradual increase of elbow ROM to full ROM by 8 weeks after surgery
    - Increase ROM 5-10° per week
  - Protect healing tissues & reconstructed ligament
  - Improve muscular strength of arm, shoulder, and core
- Precautions
  - Continue hinged brace until 6 weeks after surgery
  - Discontinue brace after 6 weeks except unsafe environments
  - AVOID VALGUS FORCE ACROSS ELBOW
- Exercises
  - Continue AROM/AAROM of elbow & wrist
  - Incorporate gentle PROM only if necessary to meet ROM goals
  - Shoulder, elbow, wrist isotonic with light resistance

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- Scapular strengthening & stabilization
- Hip & core strengthening
- Cervical spine stretching
- Walking & stationary bike OK with brace on

### **Phase III: Weeks 9-12**

- Goals
  - Increase strength and endurance
  - Maintain full active elbow ROM
  - Begin entry level plyometrics
- Precautions
  - Avoid pain with strengthening exercises
  - Post-exercise soreness should be <4/10 on VAS and return to baseline within 36 hours
- Exercises
  - Progressive isotonic of shoulder, elbow, wrist
  - Thrower's Ten program
  - Initiate eccentric elbow flexion strengthening
  - Address shoulder mobility imbalance (posterior capsule tightness, pec minor tightness, etc).
  - Manual resistance diagonal patterns
  - Hip, core, lower extremity strengthening
  - Scapular strengthening & stabilization
  - Walking & stationary bike OK with brace off

### **Phase IV: Weeks 13-20**

- Goals
  - Maximize shoulder/scapular strength in throwing positions
  - Initiate education on throwing mechanics
  - Begin higher level plyometrics
- Exercises
  - Continue strengthening of shoulder, elbow, hip, core, lower extremities
  - Continue Thrower's Ten program
  - Scapular strengthening and stabilization
  - Initiate rhythmic stabilization drills with the arm at the side
  - Initiate plyometrics – 2 hand drills only
  - Slow motion “air throws”, posture & position check points
  - OK to begin running and 75% speed sprints after 16 weeks
  - Initiate Interval Throwing Program after 18 weeks if full ROM and satisfactory stability/mechanics

## Phase V: Weeks 21-36

- Goals
  - Maximize dynamic neuromuscular control of upper extremity
  - Develop biomechanically sound throwing mechanics
  - Maximize endurance of throwing muscles
- Exercises
  - Multi-joint, multi-planar strengthening program
  - Shoulder & elbow stabilization and proprioception
  - Plyometric progression
  - Continue Interval Throwing program
  - Continue hip, core, scapular, & lower extremity strengthening
  - Sport-specific cardiovascular fitness
  - Continue Thrower's Ten program
- Return to Sports
  - No return to competitive sports without clearance from physician