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Elbow Lateral Ulnar Collateral Ligament Reconstruction Post-Operative Rehabilitation Protocol

General Notes

- No elbow ROM for minimum 2 weeks
- Posterior orthosis at 90 degrees flexion with full pronation for 2 weeks
- Slow progression of supination, elbow extension and elbow flexion
- Avoid full elbow extension combined with supinated forearm for up to 16 weeks
- No weight-bearing (CKC) exercises for at least 8 weeks
- No excessive flexion for 8–12 weeks
- Unrestricted activity, including sports-specific skills, may be limited for up to 9 months

Phase I (Post op – 6 weeks)

Immobilization

- Splint x 1 week
- Brace (hinged elbow brace) for 6 weeks range of motion: 45 90 degrees
- Re-evaluate at 3 weeks for motion: if tight, advance motion to 15 105 degrees
- Brace on at ALL times

Therapeutic Exercises

- Avoid pronation and supination in brace
- Begin gentle grip strengthening at 3 weeks
- Encourage wrist extension/flexion in brace.
- Encourage motion in knee for hamstring harvest (if applicable)

Modalities/Education:

• Frequent cryotherapy for pain and inflammation (6-8 times per day) for 15-20 minutes





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Phase II (6 – 8 weeks post-surgery)

Immobilization

- · Continue brace at all times
- Increase flexion/extension 10° per week

Therapeutic Exercises:

- Elbow isometrics
- Shoulder isometrics
- Peri-scapular strengthening
- Rotator cuff protocol

Modalities/Education:

- Frequent cryotherapy for pain and inflammation
- Pre-modulated electrical stimulation if needed
- Patient education regarding posture, joint protection, positioning, hygiene, etc.

Manual:

- Scar and soft tissue mobilization as needed
- Joint mobilizations as needed (Grade 1-2)

Progression to Phase III:

- Minimal Effusion
- No pain

Phase III (8+ weeks post-surgery)

Immobilization

Discontinue brace at this point

Therapeutic Exercises

- Begin forearm resistance exercises first in flexion (90 deg) then advance to more extension as strength increases
- Continue to advance rotator cuff and scapula training / strengthening
- No lifting greater than 10 pounds for 4 weeks (12 weeks postop)

Phase IV:

Throwing protocol (per Dr. Hippensteel) starts at 4 months postsurgery