

Ulnar Collateral Ligament Repair Post op Physical Therapy Plan

Date of Surgery:
Surgeon:
Sling Use:2 wks3 wks
Splint Use: 0-10 days
Brace Use: 10 days-3wks at 30-100 degrees
3-4 wks 15-110
4-5wks 10-120
5-6 wks 5-130
D/C brace at 6 wks



Ulnar Collateral Ligament Repair

Post op Physical Therapy protocol

Ideally patients reach the milestones prior to advancing to the next phase

	Intervention	Milestones
Phase I 0-10days	 Immobilization in posterior splint at 60° Sling for 2 to 3 weeks Ice and modalities to reduce pain and inflammation Begin passive, progressing to active wrist and hand range of motion Begin hand strengthening 	Good pain controlControlled swelling
Phase II (10 days- 3wks)	 Brace setting 30° to 100° Active elbow flexion and extension 30° to 100° Increase intensity of wrist and hand strengthening Begin rotator cuff strengthening avoiding valgus stress Scapular strengthening exercises Proprioception drills emphasizing neuromuscular control 	 AROM elbow 30-100 painfree Continue to control swelling
Phase II cont. (3-6 wks)	 Brace setting from 15° to 110°; increase range settings 5° of extension and 10° of flexion per week progressing to full by week 6 Brace 10-120 wk 4 Brace 5-130 wk 5 Continue with gradual progression in ROM as outlined in phase II At wk 4 start BFR program with light tricep and bicep strengthening and continue PRE's for RTC and scapular stabilizers avoiding valgus stress Begin cardio program 	ADLs without painAROM 0-130
Phase III (6-8 wks)	Discontinue braceModalities as needed	Elbow AROM full and painfree

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Last Reviewed: 12/2023; Current to: 12/2025



	 Restore full elbow range of motion with terminal stretching Resisted biceps, wrist, and hand strengthening Proprioception and neuromuscular control drills Manual resistance and PNF patterns with proximal stabilization 	
Phase III cont (8-10 wks)	 Continue with end range stretching Continue BFR program Advance rotator cuff and scapular strengthening program Advance wrist and forearm strengthening Begin gym-strengthening program 3 to 4 times per week Seated rows, front lat. Pulls, biceps triceps, dumbbell chest press and flys-avoiding valgus stress at the elbow. Gradually increase intensity Start and progress core program 	 RTC strength 80% uninvolved side Scapular endurance test 80% of uninvolved side Hip IR WNL Glute strength 5/5 Thoracic rotation WNL
Phase IV (10-16wks)	 Continue with end range stretching Advance gym strengthening avoid valgus stress Initiate closed kinetic chain exercises in protected range Push-ups, seated serratus push-ups Initiate plyometric drills Plyoball wall drills Two-armed rebounder drills, progressing to one-armed 	 UE Y-balance 75% of norm or 85% to non-op side SMBT 75% norm or 85% non-op side CKCUEST 75% norm ≥30 score on Psychological Readiness for RTS Shoulder total arc motion equal to non op side
Phase IV (16-24 wks)	 Progress strength Progress power* Advance closed chain exercises and plyo drills* 	 UE Y-balance 90% CKCUEST 90% norm or > Pass prone scapular endurance test <u>>4</u>0 on Psychological Readiness for RTS

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Phase V (24 wks –	May begin interval throwing program if	 Completion of
9+mos)	cleared by MD_and if season dictates	throwing program
	appropriate timing	without pain or
	• Continue strength, power and speed*	swelling
	• Sport specific drills/ position specific load	• IR ER strength 10%
	progression	>non op side
		• ≥50 on Psychological
		Readiness for RTS
		 Completion of UE
		functional test battery
		with 97% passing rate

*For UE power progression exercises go to https://www.stlukesonline.org/health-services/specialties/programs/st-lukes-sports-medicine-program/therapy-plans/power-progression-upper-extremity/phase-1

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