

27207 Lahser Road #200-B  
Southfield, MI 48034  
Ph. (248)663-1900

**Kyle Anderson, MD**  
**William Beaumont Hospital**  
6900 Orchard Lake Rd #103  
W. Bloomfield, MI 48322  
Ph. (248)855-7400

3535 W. 13 Mile Rd. #605  
Royal Oak, MI 48073  
Ph. (248)551-9100

## **Ulnar (Medial) Collateral Ligament Reconstruction Post-Operative Protocol**

### **Phase 0 and Precautions**

1. Check for clean and dry incisions
2. Graft sites: palmaris longus, gracilis and semi-t tendon
3. Educate patient on posterior splint and brace wear
4. Protect graft: **NO Extreme Flexion, Extension, and/or Valgus**

### **Phase 1- immediate postoperative phase (0-3 weeks)**

*Goals: Protect healing tissue  
Decrease pain/inflammation  
Retard muscle atrophy*

- A. Postoperative week 1
  1. Posterior splint at 90 degrees elbow flexion
  2. Wrist AROM extension/flexion
  3. Elbow compression dressing (2-3 days)
  4. Exercises: Gripping  
Wrist ROM  
Shoulder Isometrics (No Shoulder ER)  
Biceps Isometrics
  5. Cryotherapy
  6. May initiate from throwing with splint on (use trunk and lower extremity components for overhead delivery with arm at side)—  
a.k.a shoulder dumping
  7. Knee ROM (w/ gracilis or semi-t Passive-to-active pain-free)
- B. Postoperative week 2
  1. Application of functional brace 40 to 90 degrees
  2. Initiate wrist isometrics
  3. Initiate elbow flexion/extension isometrics
  4. Continue all exercises listed above
- C. Postoperative week 3
  1. Advance brace 15(20) to 110 degrees (gradually increase ROM, 5 degrees of extension/ 10 degrees of flexion per week)
  2. Isometric ham set and SLR (pain-free)

### **Phase 2- Intermediate phase (weeks 4-8)**

*Goals: Gradual increase in ROM*

27207 Lahser Road #200-B  
Southfield, MI 48034  
Ph. (248)663-1900

**Kyle Anderson, MD**  
**William Beaumont Hospital**  
6900 Orchard Lake Rd #103  
W. Bloomfield, MI 48322  
Ph. (248)855-7400

3535 W. 13 Mile Rd. #605  
Royal Oak, MI 48073  
Ph. (248)551-9100

*Promote healing of repaired tissue  
Regain and improve muscular strength*

- A. Week 4
  - 1. Functional brace set (10 to 120)
  - 2. Begin light resistance exercises for arm (1 lb) wrist curls (extension, flexion, pronation/supination, and elbow flexion and extension)
  - 3. Progress shoulder program, emphasize RTC strengthening (avoid ER until 6<sup>th</sup> post-op week)
- B. Week 6
  - 1. May DC Brace
  - 2. Progress elbow strengthening exercises
  - 3. Initiate shoulder ER strengthening
  - 4. Progress shoulder program
  - 5. Progress LE strengthening (quad and ham)

**Phase 3- Advanced strengthening phase (weeks 9-13)**

*Goals: Increase strength, power, and endurance  
Maintain full elbow ROM  
Gradually initiate sporting activities*

- A. Week 9
  - 1. Initiate eccentric elbow flexion and extension
  - 2. Continue isotonic program; forearm and wrist
  - 3. Continue shoulder program (see pre and post thrower's exercises)
  - 4. Manual resistance diagonal patterns
  - 5. Initiate plyometric exercise program
- B. Week 11
  - 1. Continue all exercises listed above
  - 2. May begin light sport activities (e.g. golf/swimming)

**Phase 4- Return to Activity phase (weeks 14-26)**

*Goals: Continue to increase strength, power, and endurance  
Gradual return to sport activities*

- A. Week 14
  - 1. Initiate interval throwing program (or determined by physician)
  - 2. Continue strengthening program

**Kyle Anderson, MD**  
**William Beaumont Hospital**

27207 Lahser Road #200-B  
Southfield, MI 48034  
Ph. (248)663-1900

6900 Orchard Lake Rd #103  
W. Bloomfield, MI 48322  
Ph. (248)855-7400

3535 W. 13 Mile Rd. #605  
Royal Oak, MI 48073  
Ph. (248)551-9100

3. Emphasize on elbow and wrist strengthening and flexibility exercises

B. Week 22-26

1. Return to competitive throwing (or determined by physician)

DC Criteria: Full ROM, good to normal strength, and return to ADL's

Referenced from The Athlete's Elbow by Andrews JR, Altchek DW