



Orthopedic Surgery, Sports Medicine & Arthroscopy Specialists

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REHABILITATION PROTOCOL- Nonoperative UCL tear

The rehabilitation guidelines are presented in a criterion based progression program. Individual patients will progress at different rates depending on their age, associated injuries, pre-injury health status, rehab compliance, tissue quality and injury severity. Specific time frames, restrictions, and precautions may also be given to protect healing tissues and the surgical repair/reconstruction. The therapist should consult the referring physician with any questions or concerns.

INDIVIDUAL CONSIDERATIONS

PHASE 1 (~0-2 weeks)

REHAB GOALS	<ol style="list-style-type: none"> 1. Protection of elbow 2. Gradual restoration of ROM 3. Minimize swelling & pain
PRECAUTIONS	<ol style="list-style-type: none"> 1. Hinged elbow brace 20-90 degrees 2. Ice as needed for pain
RANGE OF MOTION EXERCISES	<ul style="list-style-type: none"> ○ Passive elbow ROM 20-90 ○ Sport specific shoulder/hip/LE stretches ○ Soft tissue mobilizations/techniques as tolerated
SUGGESTED THERAPEUTIC EXERCISES	<ul style="list-style-type: none"> ○ As above ○ LE and core activities when pain tolerates & non wt bearing UE ○ Rhythmic stabilization of scapula/shoulder/elbow, sitting/side lying scapular PNF ○ Week 1- gripping, wrist, elbow & shoulder isometrics ○ Week 2- rotator cuff (ER/IR at side, full can, abduction) & scapular (prone row & horizontal abduction), wall wipes & table slides ○ Higher level athlets- balance/proprioception begin 2 leg, progress to unilateral, unstable surface, etc
CARDIOVASCULAR EXERCISE	Stationary bike
PROGRESSION CRITERIA	<ul style="list-style-type: none"> ○ Minimal effusion ○ Elbow ROM 20-90 ○ No pain to palpation ○ Pain free special tests & min/no laxity with valgus stress

PHASE 2 (~3-10 weeks)

REHAB GOALS	<ol style="list-style-type: none"> 1. Decrease inflammation 2. Improve ROM 3. Minimize pain and swelling 4. Improve strength & endurance
PRECAUTIONS	<ol style="list-style-type: none"> 1. Hinged elbow brace, advance 10 deg per week 2. Ice as needed after activity
RANGE OF MOTION EXERCISES	<ul style="list-style-type: none"> ○ Continue phase 1 exercises ○ Progress passive elbow ROM to full by week 4 ○ Mobilizations/soft tissue technique as needed
SUGGESTED THERAPEUTIC EXERCISES	<ul style="list-style-type: none"> ○ Continue phase 1 exercises ○ Advance LE & core strengthening. Ok for UE wt bearing core ○ UE- lateral raises, shoulder rows, shoulder press ○ thrower’s exercises: ER/IR at 0 abduction (progress to IR/ER as pain tolerates), scaption ER full can, rows into ER at 90 abduction seated on stability ball, lower trap seated on stability ball, elbow flexion, elbow extension/triceps, wrist extension, wrist flexion, supination, pronation, sleeper stretch, supine horizontal adduction stretch into IR, Prone horizontal abduction neutral/full ER at 100, prone row, Diagonal pattern (D2) flexion/extension ○ Closed chain- ball stabilization, pushup plus (maintain elbows close to trunk) ○ Manual PNF resistance of elbow, wrist & finger flexion, forearm supination followed by elbow, wrist & finger extension & forearm pronation ○ Manual resistance for ER ○ LE agility & sports drills
CARDIOVASCULAR EXERCISE	<p>Continue phase 1 Elliptical</p>
PROGRESSION CRITERIA	<ul style="list-style-type: none"> ○ Full pain free ROM ○ 5/5 strength ○ No valgus laxity or provocative maneuvers

PHASE 3 (~11-14 weeks)

REHAB GOALS	<ul style="list-style-type: none"> ○ Maintain ROM ○ Improve strength ○ Minimize pain
PRECAUTIONS	<ul style="list-style-type: none"> ○ Discontinue elbow brace
RANGE OF MOTION EXERCISES	<ul style="list-style-type: none"> ○ Continue exercises from phase 2. ○ Mobilizations as needed ○ Posterior shoulder/pec stretches for throwers

SUGGESTED THERAPEUTIC EXERCISES	<ul style="list-style-type: none"> ○ Continue exercises from phase 2 ○ LE & core- progress strengthening. ○ UE- rows, lat pull downs, shoulder press, bench press ○ thrower’s exercises: progress resistance/weight ○ Progress PNF, rhythmic stabilization, balance & closed chain activities ○ Plyometrics- UE 2 hand, begin hands close to trunk, progress to side to side & overhead. After 2 weeks progress to one hand
CARDIOVASCULAR EXERCISE	<p>Continue phase 2 Ok to start swimming, jogging</p>
PROGRESSION CRITERIA	<ul style="list-style-type: none"> ○ Full pain free active ROM ○ No pain/swelling/instability ○ Completion of 2 hand plyometrics ○ 5/5 strength

PHASE 4 (~15+ weeks)

REHAB GOALS	<ul style="list-style-type: none"> ○ Full ROM in all planes ○ No pain with sport activities ○ Improvement of strength, endurance, neuromuscular control ○ Return to sport/work
PRECAUTIONS	<p>Post-activity soreness should resolve within 24 hours Avoid post activity swelling</p>
RANGE OF MOTION EXERCISES	<ul style="list-style-type: none"> ○ Continue with flexibility exercises from previous phase ○ Gentle end range stretching as needed ○ LE and core flexibility ○ Mobilizations as needed
SUGGESTED THERAPEUTIC EXERCISES	<ul style="list-style-type: none"> ○ Continue phase 3 activities. Progress with resistance/load. ○ Plyometrics- progress to 90/90 drills & simulated throwing ○ Sport specific- ok to begin overhead sport specific activities. Throwers begin interval throwing program
CARDIOVASCULAR EXERCISE	<p>Progress to baseline , jog/run progression</p>
PROGRESSION CRITERIA- RETURN TO SPORT	<ul style="list-style-type: none"> ○ Full ROM ○ Completion of sport specific program/throwing program ○ Elbow flexion 10-20% stronger & elbow extension 5-15% stronger than non-involved arm ○ Pain free with all sports activities ○ Physician clearance