



Ulnar Collateral Ligament Repair
w/ Internal Brace
Daniel Lygrisse, DO
Midwest Orthopaedic Center - Peoria, IL

	PRECAUTIONS	ROM	EXERCISES
Phase 1: 0-2 weeks Protection	Splint or hinged elbow brace locked at 90° May wash surgical site after first therapy visit	No ROM	Gentle wrist and finger flexion, extension Stationary bike, no arm use
Phase 2: 2-6 weeks Early Motion	Initially increase hinged brace end-ranges for flexion and extension to patient's pain threshold and then by 10-15° per week until full ROM	Shoulder AROM Gentle elbow AROM to tolerance	Light isotonic scapular strengthening/stabilization Core strengthening, no arm use
Phase 3: 6-12 weeks Strengthening	D/C brace 6 weeks post-op Avoid valgus force across the elbow for 8 weeks	Full Elbow AROM	6 Weeks: Begin "Thrower's 10" program for hand, wrist, elbow strengthening; begin 2-hand plyometrics 8 Weeks: Progress strength; Begin 1-hand plyometrics; add front planks 9 Weeks: add side planks 10 Weeks: add seated bench press machine
Phase 4: 12 week - 6 months Return to throwing	Only Progress to next level when: No pain/stiffness during or after throwing; Sufficient strength through final set; Effortless motion and sound fundamentals; Consistently accurate throws being "on a line"		Begin pre-injury weight-lifting progressions: Upper/Lower/Core 12 Weeks: Start interval throwing program (ITP) with short distances 30-45 feet. 16 weeks: Can begin long-toss ITP 20 weeks: can begin mound ITP **JOSPT program linked on our website**
Phase 5: Return to competition	No pain	Full ROM	Only return once asymptomatic with throwing program and with good mechanics.

Please send OT progress notes prior to each MD visit

This protocol is not a substitute for clinical decision making of the health care professional.

Please see OT referral for any specific post op instructions; Call for op-reports if needed. 309-691-1400

Long toss ITP: [Ijspt 2024 19 3 94146 197892.pdf](#)

Mound ITP: [Ijspt 2024 19 3 94146 197893.pdf](#)