

Rehabilitation Following UCL Reconstruction Using Docking Procedure

I. Post-Operative Phase 1 (Week 1-4)

Goals:

- Promote healing: reduce pain, inflammation and swelling
- Begin to restore ROM to 30-90 degrees
- Independent Home Exercise Program

Precautions:

- Brace should be worn at all times
- No PROM of the elbow

Treatment Strategies:

- Brace set at 30 degrees to 90 degrees of flexion
- Elbow AROM in brace
- Wrist AROM
- Scapula isometrics
- Gripping exercises
- Cryotherapy
- Home Exercise Program

Criteria for Advancement:

- Elbow ROM : 30- 90 degrees
- Minimal pain or swelling

II. Post-Operative Phase 2 (Week 4-6)

Goals:

- ROM: 15- 115 degrees
- Minimal pain and swelling

Precautions:

- Continue to wear brace at all times
- Avoid PROM
- Avoid valgus stress

Treatment Strategies:

- Continue AROM in brace
- Begin pain-free isometrics in brace (deltoid, wrist flex/ext, elbow flex/ext)
- Manual scapula stabilization exercises with proximal resistance
- Modalities as needed
- Modify Home Exercise Program

Criteria for Advancement:

- ROM: 15- 115 degrees
- Minimal pain and swelling

III. Post-Operative Phase 3 (6-12 weeks)

Goals:

- Restore full ROM
- All upper extremity strength 5/5
- Begin to restore upper extremity endurance

Precautions:

- Minimize valgus stress
- Avoid PROM by the clinician
- Avoid pain with therapeutic exercise

Treatment Strategies:

- Continue AROM
- Low intensity/ long duration stretch for extension
- Isotonics for scapula, shoulder, elbow, forearm, wrist
- Begin IR/ER strengthening @ 8 weeks
- Begin forearm pronation/ supination strengthening @ 8 weeks
- Upper Body Ergometer (if adequate ROM)
- Neuromuscular drills
- PNF patterns when strength is adequate
- Incorporate eccentric training when strength is adequate
- Modalities as needed
- Modify Home Exercise Program

Criteria for Advancement:

- Pain free
- Full elbow ROM
- All upper extremity strength 5/5

IV. Post-Operative Phase 4 (Week 12- 16)

Goals:

- Restore full strength and flexibility
- Restore normal neuromuscular function
- Prepare for return to Activity

Precautions:

- Pain-free plyometrics

Treatment Strategies:

- Advance IR/ER to 90/90 position
- Full upper extremity flexibility program
- Neuromuscular drills
- Plyometric program
- Continue endurance training
- Address trunk and lower extremities
- Modify Home Exercise Program

Criteria for Advancement:

- Complete plyometrics program without symptoms
- Normal upper extremity flexibility

V. Post- Operative Phase 5 (4 -9 months)

Goals:

- Return to Activity
- Prevent Reinjury

Precautions:

- Significant pain with throwing or hitting
- Avoid loss of strength or flexibility

Treatment Strategies:

- Begin interval throwing program at 4 months
- Begin hitting program at 5 months
- Continue flexibility exercises
- Continue strengthening program (incorporate training principles)

Criteria for Discharge:

- Pain free
- Independent HEP
- Independent throwing/hitting program