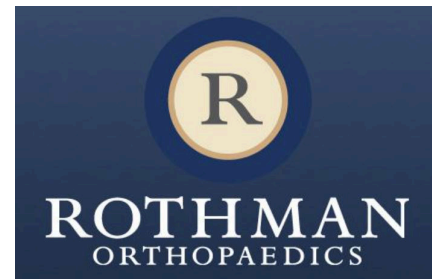


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UCL Reconstruction Physical Therapy Protocol/Prescription For Volleyball Players

Name _____

Diagnosis: s/p RIGHT/LEFT UCLR with Palmaris/Hamstring Autograft Allograft

Date of Surgery _____

Frequency: _____ times/week Duration: _____ Weeks

____ Week 1:

Elbow is immobilized in the Bledsoe Brace at 75 degrees flexion (7-10 days) with wrist free but in sling.

Dressing changed at 7-10 days after surgery

____ Week 2:

Begin active range of motion in the brace.

Brace adjusted to 15 degrees (locked) extension to full flexion

May begin grip strength in brace

____ Week 4:

Discontinue the use of the Bledsoe Brace

Shoulder and elbow ROM, PROM-AAROM-AROM, advance as tolerated

Begin muscle strengthening exercises for wrist, forearm, elbow and shoulder

Advance strengthening as tolerated (avoid aggressive weight-lifting until 12 weeks after surgery, especially chest flies or other lifts that directly stress the ligament

Valgus stress on the elbow is avoided until at least 2 months after surgery

Total body conditioning / aerobic training may begin

____ Month 3:

May begin volleyball skills but no hitting

The player may progress with skills if:

There is no pain or stiffness after practice

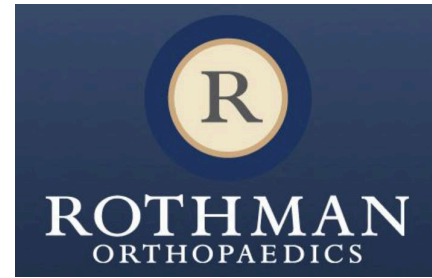
There is no significant pain or stiffness after practice

Strength is good throughout the final set with little fatigue

____ Month 4:

Begin light hitting, progress to full speed at 6 months

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____ Months 6-9:

Return to competition is permitted when the following conditions are met:
Trunk, scapula, shoulder and arm muscle strength and balance have returned to normal
There is no pain while hitting
Hitting balance, rhythm, and coordination have been reestablished

Comments:

____ Functional Capacity Evaluation ____ Work Hardening/Work Conditioning Teach HEP

Modalities

Electric Stimulation ____ Ultrasound ____ Iontophoresis ____ Phonophoresis ____ TENS
 Heat before Ice after ____ Trigger points massage Therapist's discretion

Signature _____ Date _____