

## UCL Reconstruction Physical Therapy Protocol/Prescription For Volleyball Players

**Name:** \_\_\_\_\_**Date:** \_\_\_\_\_**Diagnosis:** \_\_\_\_\_**Date of Surgery :** \_\_\_\_\_**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

**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:****Frequency:** \_\_\_\_ **times per week****Duration:** \_\_\_\_\_ **weeks****Signature:** \_\_\_\_\_**Date:** \_\_\_\_\_