

# Dr. Cory D. Smith | Orthopedic Surgery & Sports Medicine

Shoulder Reconstruction and Arthroplasty

Hip, Shoulder, Knee & Elbow Arthroscopy

## Physical Therapy Protocol: ELBOW LATERAL COLLATERAL LIGAMENT REPAIR / RECONSTRUCTION

**Recommendation:** PT/ OT 2-3 visits per week for 10-12

### weeks **Phase 1 – Maximum Protection (0 to 14 Days)**

- Reduce inflammation
- Immobilization in a posterior splint
- Sling for comfort
- Gentle shoulder pendulum ROM
- Ice and modalities to reduce pain and inflammation
- Active finger ROM
- NO WEIGHT-BEARING IN ARM FOR 6 WEEKS

### **Phase 2 – Transition to brace and improve ROM (Weeks 2 - 8)**

- Maintain brace until end of Week 6. All flexion/extension ROM in the brace.
- Week 3: 30-100° ROM arc
- Week 4: 15-100° ROM arc
- Week 5: 10-120° ROM arc
- Week 6: 0-130° ROM arc
- May begin pronation supination at Week 3. Full pronation and supination at 90° of flexion only.
- Avoid all valgus positions and valgus stress on elbow (shoulder abduction)
- May do shoulder ROM while in the brace
- Begin scapular stabilization exercises, as well as hand and wrist ROM as tolerated

### **Phase 3 – Begin Strength Regimen (Weeks 8 -16)**

- Elbow ROM should be normal by Week 10. A 5° loss of extension is acceptable. If abnormal, consult the operating surgeon.
- Increase overall strength and endurance. Begin early level plyometrics.
- Progressive isometrics for shoulder and elbow strengthening with the arm <45° abducted
- Initiate eccentric elbow flexion strengthening
- Assess shoulder mobility and address any imbalances (such as posterior capsular tightness) which may prevent optimal throwing biomechanics in the next phase.
- Manual resistance diagonal patterns
- Hip, lower extremity, and core strengthening
- Scapular strengthening and stabilization

### **Phase 4 – Return to Sport (Weeks 16 - 32)**

- Multi-joint, multi-planar strengthening program
- Shoulder and elbow stabilization and proprioceptive drills
- Initiate interval throwing program, progressing to a position-specific throwing program around Week 28 if the athlete has no pain or problems with the baseline throwing program
- Initiate sport specific return program
- Manual resistance diagonal patterns
- Hip, lower extremity, and core strengthening

\*Plyometric progressions (over several weeks); transition from 2 arms in the sagittal plane, progressing to 1 arm sagittal plane to 2 arm rotational movements to 1 arm rotational movement.

\*There should be no pain while throwing or doing sport-specific drills.