Name:		Date of Birth:
Diagnosis:	Ulnar Collateral Ligament Sprain (NonOP)	Code:S53.449
Procedure:	(NonOP Tx)	Surgery Date:

In order for University of Utah Health Care to complete this referral, please fax the patient's first consult notes to the University of Utah Orthopaedic Center at 801-581-4404. Thank you.

Timing of each phase varies based on individual patient factors, length of time immobilized, strength/ROM status, and expected performance/activity demands.

Phase I: Early ROM & Protect Repair (*Post-Injury days 0 – 7*)

<u>Goals</u>

- 1. Increase ROM
- 2. Promote healing of ulnar collateral ligament
- 3. Retard muscular atrophy
- 4. Decrease pain and inflammation
- 5. 1 week post-injury initiate cardiovascular conditioning program with modifications for injury

Activities

- 1. Brace (optional) non-painful ROM (20 \rightarrow 90 degrees)
- 2. AAROM, PROM elbow, wrist and shoulder (non-painful ROM and no shoulder ER stretching)
- 3. Initiate Isometrics wrist and elbow musculature, gripping exercises
- 4. Ice, compression
- 5. Initiate shoulder strengthening (no internal rotation)
 - CAUTION: avoid stressing medial elbow

Phase II: Intermediate Phase (Post-Injury Weeks 2 – 4)

Criteria to Progress to Phase II

- 1. No Swelling
- 2. Acute pain is diminished

<u>Goals</u>

- 1. Increase ROM
- 2. Improve strength and endurance
- 3. Decrease pain and inflammation
- 4. Promote stability
- 5. 2 weeks post-injury initiate upper/lower body strength program with modifications for injury

Activities

- 1. ROM exercises gradual increase in motion ($0 \rightarrow$ 135 degrees) 5 degrees of extension, 10 degrees of flexion
- 2. Initiate isotonic exercises
 - Wrist curls
 - Wrist extension
 - Pronation/supination
 - Biceps/triceps
- 3. Advance shoulder strengthening
 - External rotation
 - Internal rotation (Week 3)
 - Supraspinatus
- 4. Ice, compression



Phase III:Advanced Strengthening Phase (Post-Injury Weeks 5 - 6)

Criteria to progress to Phase III

1. Full AROM

- 2. No pain or tenderness
- 3. No increase in laxity
- 4. Strength 4/5 in the elbow flexors/extensors

<u>Goals</u>

- 1. Increase strength, power, and endurance
- 2. Improve neuromuscular control
- 3. Prepare athlete for gradual return to functional activities
- 4. Prepare athlete to begin to throw

Activities

1. Initiate PNF

- 2. Initiate isokinetics
- 3. Initiate Thrower's Ten to include 90/90 shoulder work
- 4. Initiate plyometrics

• To include trunk rotation, and Plyoball with mini tramp

Phase IV: Return to Activity Phase (7 - 10 Weeks post-injury)

Criteria to progress to return to throwing

- 1. Full, non-painful ROM
- 2. No increase in laxity
- 3. Isokinetic test fulfills following criteria
 - pronation: 20% greater than non-dominant side
 - flexion : 15% greater than non-dominant side
 - extension: 5% greater than non-dominant side
- 4. Satisfactory clinic exam, Physician's approval
- 5. 2 successful weeks of pain-free plyometric / 90 90 shoulder work

Activities

- 1. Initiate Interval Throwing Program (ITP)
 - 6-8 weeks post-injury (check date on which week to throw)
- 2. Continue Thrower's Ten program
- 3. Continue plyometric progression
- 4. Initiate hitting progression program after successfully completing 90 foot phase of (ITP)
- 5. Continue all exercises in Phase III
 - Throw and train on the same day
 - ITP first, followed by rehab exercises, then strength/conditioning program
 - Lower extremity and ROM on opposite days
- 6. Emphasize elbow and wrist strengthening and flexibility exercises
- 7. Continue with strengthening program

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