



Brian Waterman M.D.
ORTHOPEDIC SURGERY

Elbow MCL Reconstruction Protocol

Name: _____ Date: _____

Diagnosis: _____

Date of Surgery _____

Frequency: 1 2 3 4 times/week Duration: 1 2 3 4 5 6 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 30 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 4:

- May begin an interval-throwing program progressing from 45 ft up to 180 ft.
- Pitchers are not asked to throw past 120 ft, infielders are not asked to throw past 150ft.
- The player may progress from one distance level to the next when the following criteria are met:
 - There is no pain or stiffness while throwing
 - There is no significant pain or stiffness after throwing
 - Strength is good throughout the final set with little fatigue
 - The throwing motion is effortless and fundamentally sound
 - Accuracy is consistent and throws are online
- For Pitchers, the mound program begins at the completion of the 120 ft level.
 - The catcher is initially moved forward, but throwing with a pitching motion is reserved for the mound
 - No flat ground pitching is allowed

Months 9-12:

- 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 throwing
 - Throwing 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/after ___ Ice before/after ___ Trigger points massage
___ Therapist's discretion
___ Other _____

Signature: _____ Date: _____