

Tommy John Surgery

What is the ulnar collateral ligament (UCL)?

The UCL is a ligament on the medial side of the elbow which provides the primary restraint to valgus stress. Its three main components are the oblique, posterior, and anterior bundles. Valgus stress is placed on the elbow with motions such as throwing a baseball. Injuries to the UCL may be treated non operatively with therapy followed by a throwing program, but some patients continue to have pain with throwing which is an indication for surgery.

What is a Tommy John reconstruction?

A tommy john surgery is a reconstruction of the UCL, primarily the anterior bundle, with a tendon graft to restore stability to valgus stress on the elbow. The tendon graft of choice is the palmaris longus from the same arm. Dr Acevedo also uses an internal brace technique which makes the reconstruction stronger. The palmaris longus is a tendon in the forearm. Some patient's who do not have a palmaris longus may be consented for use of another tendon from another site or a cadaver tendon. Dr. Acevedo will discuss this with you at the pre operative visit. In addition to the reconstruction if you have ulnar nerve symptoms then Dr Acevedo may perform an ulnar nerve transposition which moves your " funny bone nerve" to the front of the elbow to relieve pressure.

What is a UCL repair with an internal brace?

In a UCL repair, Dr Acevedo places suture anchors into the bone at the origin and insertion of the UCL. The ligament is repaired with the non absorbable suture and another non absorbable suture spans the ligament and acts as an "internal brace" to protect and strengthen the repair. A repair of the ligament is indicated in an acute injury, typically less than 6 weeks. Only some UCL tears are amenable to repair. If the UCL is torn mid-substance or is torn from attritional injury then it may not be amenable to a repair.

Length of Stay

This is an outpatient surgery. You will need to have someone to drive you home after you have been discharged.

Anesthesia

Patients who have this type of surgery have general anesthesia.

Incision

You will have an incision down medial side of your elbow. After the incision has healed, it is usually very thin and not very noticeable. In addition, you will have 3 small 1cm wounds on the forearm if a Palmaris autograft is used.

Pain

You will have pain medication prescribed for you prior to discharge. It is important to stay on top of the pain medication. Most patients receive Toradol, which is a strong anti-inflammatory. Begin taking this medication when you get home. The Narcotic you are prescribed should be used as a rescue medication as needed. For the first 2 days it is advised that you take 1 of these pills around the clock to stay on top of the pain. If it is too strong, you can take Extra strength Tylenol in its place.

Splint

Your arm will be placed in a splint prior to leaving the operating room. The splint and dressing is to be kept in place until your post operative visit.

Physical Therapy

You will begin physical therapy after the splint is removed in about 2 weeks. Full rehabilitation after a tommy john surgery is 1 year.

For the first 2 weeks, you will be in a splint to allow soft-tissue healing, after which you may be progressed to a elbow range-of-motion brace. A guided therapy program is undertaken, with the goal of returning motion and strength and engaging in sport-specific exercises. An interval throwing program is begun at approximately 4 months postoperatively provided all motion, strength, and endurance parameters are met. Athletes are not allowed to throw from the mound until 6 to 8 weeks after commencement of the interval throwing program. Return to competitive throwing is expected 9 to 12 months postoperatively.

Restrictions

You may drive when you feel that you can properly control a car and you are **NOT** taking narcotic pain medication.

Day of surgery to Week 6: no lifting, no weight-bearing

Weeks 6-12: no repetitive lifting greater than 5lbs

After 12 weeks: resume normal activities, progress as Physical Therapy allows.

Follow Up Appt

You should have had your follow up appointment made at the time of your preoperative appointment. You should be seen at around 10-14 days.

DR. DANIEL C. ACEVEDO FAAOS
www.LAshoulderelbow.com

1700 E CESAR E CHAVEZ AVE #2200, LOS ANGELES, CA 90033 PH. 323-264-7600 FAX 323-261-8027
23502 LYONS AVE #202A, VALENCIA, CA 91321 PH. 818-788-0101x4451 FAX 818-788-4158
18840 VENTURA BLVD #204, TARZANA, CA 91356 Tel. 818-708-3333 FAX 818-708-9643
16530 VENTURA BLVD #100, ENCINO, CA 91436 Tel. 818-788-0101 FAX 818-855-2493