



Physical/Occupational Therapy Prescription

Name:

Date of Birth:

Diagnosis: Lateral Ulnar Collateral Ligament Insufficiency

Code: S53.20

Procedure: Lateral Ulnar Collateral Ligament reconstruction

Surgery Date:

Instructions: PT TO BEGIN AFTER _____

Range of motion:

Splint for the first two weeks post-operatively.

Begin range of motion exercises at two weeks post-operatively.

Perform all elbow flexion/extension motions with the forearm in full pronation.

Incorporate active range of motion exercises for the wrist and hand.

Please perform all forearm rotation exercises at 90° of flexion or greater.

Please perform all exercises with the arm at the side to avoid placing a varus stress across the elbow. Please instruct the patient in avoidance of varus stress and axially loading in activities of daily living for the first 3 months post-operatively.

Strengthening:

Do not begin strengthening until six weeks post-operatively.

Then begin wrist flexion/extension, forearm pronation/supination, and elbow flexion/extension strengthening, beginning with isometrics before progressing to bands.

Ok to transition to a gym-based home program at 3 months post-operatively.

Limitations:

0- 6 weeks: No work with the affected extremity

1.5-3 months No lifting greater than 10 lbs

>3 months: No restrictions, return to sport as tolerated

Modalities: Heat before and ice after therapy.

Frequency: 2-3 times/week

Duration: 6 weeks beginning at 2 weeks post operatively

Signature:

Date: