

Center for Athletic Medicine  
*Dr. Preston Wolin*  
Ulnar Collateral Ligament Reconstruction  
Using the Docking Procedure  
*Adapted from Kevin Wilk, DPT*

**Postoperative Phase I: Weeks 1-4**

Goals: Promote healing: reduce pain, inflammation, and swelling  
Begin to restore range of motion 30 to 90 degrees  
Independent home exercise program

Precautions:

Brace should be worn at all times  
No passive range of motion of the elbow

Treatment strategies:

Brace set at 30 degrees to 90 degrees of flexion  
Elbow, active range of motion in brace  
Wrist, active range of motion  
Scapula isometrics  
Gripping exercises  
Cryotherapy  
Home exercise program

Criteria for advancement:

Elbow, range of motion 30 degrees to 90 degrees  
Minimal pain or swelling

**Postoperative Phase II: Weeks 4-6**

Goals: Range of motion: 15 degrees to 115 degrees  
Minimal pain and swelling

Precautions:

Continue to wear brace at all times  
Avoid passive range of motion  
Avoid valgus stress

Treatment strategies:

Continue active range of motion in brace  
Begin pain-free isometrics in brace (deltoid, wrist flexion/extension,  
elbow flexion/extension)  
Manual scapula stabilization exercises with proximal resistance  
Modalities as needed  
Modify home exercise program

Criteria for advancement:

- Range of motion 15 degrees to 115 degrees
- Minimal pain and swelling

**Postoperative Phase III: Weeks 6-12**

Goals: Restore full range of motion

All upper extremity strength 5/5

Begin to restore upper extremity endurance

Precautions:

- Minimize valgus stress
- Avoid passive range of motion by clinician
- Avoid pain with therapeutic exercise

Treatment Strategies:

- Continue active range of motion
- Low-intensity/long-duration stretch for extension
- Isotonics for scapula, shoulder, elbow, forearm, wrist
- Begin internal/external rotation strengthening at 8 weeks
- Begin forearm pronation/supination strengthening at 8 weeks
- Upper body ergometer (if adequate range of motion)
- Neuromuscular drills
- Proprioceptive neuromuscular facilitation patterns when strength is adequate
- Incorporate eccentric training when strength is adequate
- Modalities as needed
- Modify home exercise program

Criteria for advancement:

- Pain-free
- Full elbow range of motion
- All upper extremity strength 5/5

**Postoperative Phase IV: Weeks 12-16**

Goals: Restore full strength and flexibility

Restore normal neuromuscular function

Prepare for return to activity

Precautions:

- Pain-free plyometrics

Treatment Strategies:

- Advance internal/external to 90/90 position
- Full upper extremity flexibility program
- Neuromuscular drills
- Plyometric program

- Continue endurance training
- Address trunk and lower extremities
- Modify home exercise program

Criteria for advancement:

- Complete plyometrics program with out symptoms
- Normal upper extremity flexibility

### **Postoperative Phase V: Months 4-9**

Goals: Return to activity  
Prevent re-injury

Precautions:

- Significant pain with throwing or hitting
- Avoid loss of strength or flexibility

Treatment Strategies:

- Begin interval throwing program at 4 months
- Begin hitting program at 5 months
- Continue flexibility exercises
- Continue strengthening program (incorporate training principles)

Criteria for discharge:

- Pain-free
- Independent home exercise program
- Independent throwing/hitting program