

UCL Non-Operative Protocol for Non-Overhead Athletes

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General Notes:

- NSAIDs as needed initially to help with pain control
- Ice/cryo treatment as needed throughout protocol to reduce pain and swelling. Typically applied approximately 20 minutes on and 20 minutes off
- Start compression sleeve immediately. Ideally from the hand to the axilla (armpit), otherwise from wrist to axilla should be sufficient.
- Goal for full motion by 6 weeks
- If hinged elbow brace deemed necessary, it will be used from about 3 – 6 weeks post injury and possibly during return to play.
- Avoid all exercise that puts valgus stress through the elbow for 6 weeks
- Athletes may participate in walk throughs as long as pain free and using brace (if brace prescribed).
- Athletes may be able to participate in non-contact drills as long as pain free and using brace (if brace prescribed) after discussion with M.D.

	Weight-bearing	Splint/Brace	ROM	Modalities	Exercise
Phase I Initial Treatment and Pain Management Phase	Limit 0 – 5lbs. Should not cause pain.	If significant pain, hinged elbow brace unlocked within non-painful arc of motion If minimal pain no brace may be needed but will be based on individual situation.	Start within pain free arc of motion Maintain shoulder, wrist, hand motion	Ice/cryo As needed NSAIDs Compression sleeve	No strengthening Maintain cardiovascular fitness and lower extremity strength etc as long as elbow is protected. Maintain core, posture
Phase II Start once pain significantly improves and patient tolerates more motion Goal: Restore pain free ROM	Slowly advance weight through extremity as symptoms allow.	Continue hinged elbow brace as needed based on phase I criteria	Progress ROM as tolerated.	As per Phase I. No massage No dry needling	Begin isometrics of shoulder, elbow, wrist, hand. For the elbow, add particular focus on the medial dynamic stabilizers (pronator teres, FCU, FDS) done within pain-free range. Ball squeezes
Phase III Start phase III once full ROM Goal: Restore strength	WBAT	As per phase II criteria	Maintain pain free full ROM	As Phase II.	As Phase II Progress strengthening as tolerated
Phase IV Goal: Return back to sport specific training	WBAT	As needed / desired	Full	As in Phase III	As Phase III Advance exercise as tolerated. Incorporate sport specific drills. No contact drills Start plyometrics

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Phase V Goal: Return to full competition	WBAT	As needed/desired	Full	As above	Progress back into full speed and contact drills. <u>For football or other contact sports:</u> If a hinged brace prescribed, initially wean back into play with brace and if athlete tolerates well, can start to wean out as desired.
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Additional Notes:

Adapted from:

Wilk et al Clin Sports Med 2004

Patel et al Orthop Clin N Am 2014

Rettig et al Am Journal Sports Med 2001

American Shoulder and Elbow Surgeons 2010 Meeting

Ross et al Am Journal Sports Med 1999

Galatz LM Shoulder and Elbow Orthopaedic Knowledge Update 2008