

Elbow Ulnar Nerve Release/Transposition

Physical Therapy Post-op Protocol

Week 0-2

Primary goal: Allow incision healing, begin early motion

- Sling and bulky dressing on elbow until first post-operative visit (7 days)
- Elevate on pillows to heart level or above
- Begin ball squeezes and wrist/shoulder motion
- Transitioned to lighter dressing and early motion begun at first post-op visit

Weeks 3-4:

Primary goals: restore motion, decrease pain, avoid muscle atrophy

- No ROM restrictions unless otherwise stated
- Gentle stretching towards ROM goals
- Begin passive, active-assisted, and active ROM flexion and extension, supination/pronation
 - Begin with no resistance and gradually introduce Therabands
 - Nerve gliding exercises
- May incorporate Blood Flow Resistance (BFR)
- Continue shoulder pendulum and wrist ROM, ball squeezes
- Begin scapular stabilizations and closed chain strengthening
- Begin core strengthening
- Begin Thrower's Ten exercises, if indicated

Weeks 5-7:

Primary goals: achieve full motion, increase strength

- Progress resistance for biceps & triceps, deltoid, traps, pecs
- Blood Flow Restriction
- Continue Thrower's Ten Program, if indicated
- Stretching & ROM program for shoulder
- Continue scapular stabilizations, (Prone T, V, and Ys)
- Continue ROM exercises for elbow
- Continue core strengthening and introduce balance/proprioception training

Weeks 8+

Primary goals: Preparation to return to throwing/sport

- Baseball/softball may consider hitting/throwing progression once cleared by physician
- Continue Thrower's Ten
- Plyometric drills
- Continue eccentric power/weightlifting

Weeks 14+

Primary goals: return to throwing/sport

- Functional assessment of overall physical conditioning and throwing mechanics
- Modify or discontinue formal therapy and implementing home therapy maintenance regimen
- Clearance to return to competition made by Physician