



POSTOPERATIVE REHABILITATION PROTOCOL FOLLOWING ELBOW ARTHROSCOPY

Columbia University Sports Medicine and Rehabilitation

Louis U. Bigliani, MD
Office (212) 305-5564
Fax (212) 305-0999

Christopher S. Ahmad, MD
Office (212) 305-5561
Fax (212) 305-4040

William N. Levine, MD
Office (212) 305-0762
Fax (212) 305-4040

Edwin R. Cadet, MD
Office (212)-305-4626
Fax (212)-305-4040

AJ Yenchak, PT, DPT, CSCS
Office (212)-326-3327
Fax (212)-326-3345

Appointment Scheduling
(212) 305-4565

Office Locations:
51 West 51st Street, Ste 370
New York, NY 10019
212-326-3333
212-326-3345 (fax)

161 Ft. Washington Ave.
New York, NY
212-305-5561

500 Grand Ave
Englewood, NJ 07020

Website:
Cses.cumc.columbia.edu

PRECAUTIONS

- Excessive &/or aggressive motion first 5 days unless specified by physician
- No excessive elbow loading through exercise for 8 weeks
- No throwing for 10 weeks (unless specified by Physician)

MAXIMUM PROTECTION PHASE (WEEKS 1 to 3)

Goals: Restore full wrist and elbow ROM,
Decrease swelling & pain,
Promote healing of articular cartilage
Retardation or muscle atrophy

A. Days 1 to 5

1. Begin gently moving elbow in bulky dressing
2. Remove bulky dressing and replace with gauze pads & elastic bandages
3. Immediate post-op hand & wrist ROM, gripping exercises
 - a. Putty/grip strengthening
 - b. Wrist flexor stretching
 - c. Wrist extensor stretching
 - d. Elevate hand to reduce swelling
 - e. Continue light elbow AAROM exercises in bulky dressing

(3-4 x daily)

B. Post-op Day 5 through 7

1. PROM & AAROM elbow extension & flexion (motion to tolerance)
2. Begin PRE exercises with 1 lb weight
 - a. Wrist curls
 - b. Reverse wrist curls
 - c. Neutral wrist curls
 - d. Pronation/supination
 - e. Active elbow flexion & extension (frequent motion- 5min every hour)

C. Post-op Week 2 to 4

1. Emphasize elbow ROM and restoring full ROM
2. Begin light overpressure program into extension
3. Perform AAROM & PROM
 - Full PROM at end of week 3**
4. Begin shoulder program week 2
5. Thrower's Ten Program week 3
6. Running program may begin week 4

D. Post-op Weeks 5 to 6

1. Continue all exercises above
2. Emphasis on restoration of full ROM
3. If lacking full extension – low load long duration (LLLD) stretching
4. Continue AAROM program for articular cartilage healing
5. Pool program – light exercises in water (once incisions close)

II. MODERATE PROTECTION PHASE (WEEKS 6-10)

Goals: Protect articular cartilage healing
 Restore/maintain Full ROM
 Shoulder ROM & Strength

A. Weeks 6 -10

1. Continue AAROM & PROM exercises for elbow
2. Initiate resistance for biceps & triceps
3. Continue Thrower's Ten Program
4. Stretching & ROM program for shoulder
5. Continue ROM exercises for elbow
6. Core strengthening program
7. Still maintain precautions regarding loading of the elbow
8. Begin 2 handed plyometric program (chest pass, soccer throw, side to side) week 8

III. MINIMAL PROTECTION PHASE (WEEKS 10 -16)

Goals: Incorporate shoulder endurance program
 Begin throwing program
 Improve LE strength/core strengthening in preparation for return to competitive sport

A. Weeks 10 to 16

1. Continue AAROM & PROM exercises
2. Advanced Thrower's Ten Program initiation
3. ROM & Stretch Shoulder
4. Core Program
5. Running, agility drills etc
6. Initiate interval sport programs
7. Continue Advanced Thrower's Ten Program
8. Continue stretching & flexibility exercises of elbow & shoulder
9. Initiate 1 hand plyometric drills at week 10
 - 1 hand throws
 - 1 hand wall dribbles

IV. GRADUAL RETURN TO ACTIVITY PHASE (WEEKS 12 & BEYOND)

Goals: Gradual return to activity/sport
Prepare patient for safe & successful return to sports

Criteria to progress to Advanced Phase:

1. Full nonpainful ROM
2. No pain or tenderness in elbow/shoulder
3. Isokinetic test that fulfills criteria to throw
4. Satisfactory clinical exam
5. Successful completion of modified throwing program (physician/physical therapist directed)

Revised AJY/KEW/CSA/JRA: 6/2012