

NHS Foundation Trust

Rehabilitation Following a Medial Ligament Reconstruction of the Elbow

Rehabilitation				
On Discharge Aim: √ Protect repair √ Aware of importance of early exercise √ Independent with exercises √ Aware of rehab' plan	 Observe for signs of infection. Sling for 6 weeks. Bandages taken down at 48-72 hours. Hand and wrist ROM exercises Overhead active flexion/extension forearm in neutral in supine with shoulder at 90 degrees flexion Commence (NWB) CKC exercises Pro/Supination with elbow at 90° flexion 			
Weeks 2-6 Aim: √ Protect repair √ Prevent stiffness √ Regain AROM √ Prevent increased tone in biceps/brachialis	 Postural education Shoulder girdle exercises/education Light proprioceptive exercises Light isometric exercises, including flexor/pronator group Short lever kinetic chain rehab' Avoid loading which applies a valgus stress to the elbow e.g. overhead throw Pronator/flexor activity at 90 degrees flexion 			
Week 6+ Aim: √ Full AROM √ Proximal control √ Pronator/flexor activity	 Commence strengthening of the full kinetic chain, starting short lever, avoiding pronation in extension, and valgus stress positions. Flexor/pronator strengthening work in elbow flexion 			
Week 12 + √ Full strength, function and control √ Confidence and proprioception	 Progress strengthening into long lever positions Commence plyometrics, starting with slow, low impact loading Throwing/falling/Strength progression as required Return to sport rehab' 			

Sling	Don Joy Aircast 6 weeks
Physiotherapy	Within 2 weeks PO
Follow Up	

Milestones				
Full AROM 6 Weeks				
Driving	Once ROM and muscle strength has restored			



Light/Sedentary Work	6 weeks
Heavy/Manual Work	12 weeks
Sport	Sport dependent

Patient specific instructions		