

## Physical Therapy Prescription – Elbow MCL Reconstruction

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Procedure:** R / L arthroscopic loose body removal

**Date of Surgery:** \_\_\_\_\_

**Frequency:** 2-3 times per week for \_\_\_\_\_ weeks

### PHASE I (Weeks 0 – 4): decrease edema

- **Brace:** Locked at 0-90° worn at all times. NWB
- **Range of Motion:** PROM, AAROM → AROM as tolerated
- **Therapeutic Exercises:** Scapular stabilizing exercises, gentle RTC strengthening, gentle hand/wrist/shoulder ROM
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

### Phase II (Weeks 4 – 6)

- **Brace:** Locked at 0-90° worn at all times. NWB
- **Range of Motion:** Full. No forced full flexion.
- **Therapeutic Exercises:** Continue regaining full ROM. Advance exercises in phase I.
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

### Phase III (Weeks 6 – 12)

- **Weightbearing:** 5 lbs
- **Brace:** None
- **Range of Motion:** Full
- **Therapeutic Exercises:** Continue with scapular and rotator cuff strengthening, begin forearm resistance exercises-first in flexion and then advance to extension
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

### Phase IV (Weeks 12 – 3 months)

- **Weightbearing:** Full
- **Brace:** None
- **Range of Motion:** Full
- **Therapeutic Exercises:** Continue with shoulder strengthening, begin aggressive rotational exercises, light tossing, and sport specific activities.
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_