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## Physical Therapy Prescription – Elbow Arthroscopic Loose Body Removal

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

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

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

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

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

### PHASE I (Weeks 0 – 2): decrease edema

- **Weightbearing:** As tolerated
- **Range of Motion:** AAROM → AROM as tolerated
- **Therapeutic Exercises:**
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

### Phase II (Weeks 2 – 4)

- **Weightbearing:** As tolerated
- **Range of Motion:** Full
- **Therapeutic Exercises:** Continue regaining full ROM. May add strengthening.
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

### Phase III (Weeks 4 – 6)

- **Weightbearing:** As tolerated
- **Brace:** None
- **Range of Motion:** Full
- **Therapeutic Exercises:** Progress Phase II exercises; add plyometrics and sport-specific exercises; return to athletic activity as tolerated at week 6
- **Modalities:** Per therapist, including electrical stimulation, ultrasound, heat (before), ice (after)

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

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