



**Derek Cuff, M.D.**

Suncoast Orthopaedic Surgery and Sports Medicine

836 Sunset Lake Blvd

Venice, Florida 34292

Phone: 941-485-1505

**Website: [www.suncoastshoulder-elbow.com](http://www.suncoastshoulder-elbow.com)**

**Email: [dcuff001@hotmail.com](mailto:dcuff001@hotmail.com)**

**Radial head replacement with LUCL ligament repair**

Post op day 1-10

- Patient to remain in posterior splint and sling at all time
- Arm elevation while at rest
- Must work on digital range of motion 4 times a day x 10 min
- Follow up with M.D. on post op day 10 for suture removal

Week 2-4

- Patient to begin formal PT/OT working on passive elbow flexion and extension, 3 x a week with formal therapy session
- Goals of ROM are restricted to 30-130 degrees
- Range of motion to be performed with forearm in maximal pronation with palm facing the floor at all times

- Arm is NOT to be supinated at any time
- Arm to be maintained in sling at 90 degrees and in pronation or elbow brace if patient can tolerate bracing while at rest
- Can work on active wrist, hand and digital ROM as well
- Edema control as tolerated

#### Week 4-6

- Continue formal PT progressing to passive ROM with goal of 0-130
- Arm to remain in maximal pronation at all times of therapy work with palm facing the floor, 3 x a week.
- Continue sling or brace with arm maintained in 90 degrees and in pronation while at rest
- Continue active wrist, hand, digital ROM

#### Week 6-10

- Sling can be discontinued at week 6
- Continue formal PT/OT progressing to active ROM as tolerated and can begin pronation and supination
- Patient PT/OT visits can be decreased to 2 X a week
- NO strengthening at this point
- Patient can use arm for all ADL's

#### Week 10-12

- Can progress to gentle strengthening at this point
- Activity as tolerated with elbow/wrist and hand