
Elbow Ulnar Collateral Ligament (UCL) Repair or Reconstruction

What is the UCL?

The ulnar collateral ligament (LUCL) is a ligament on the inside of your elbow that provides stability to your elbow joint. This ligament may be injured during an elbow dislocation or subluxation, or from repetitive wear and tear from throwing sports – especially baseball. If torn, this injury may cause elbow instability, pain, and decreased ability to throw – especially affecting accuracy, speed, and endurance.

How do you repair or reconstruct the UCL?

If the ligament injury is from an acute, recent injury and warrants surgery, it may be repaired back down to its bony attachment with sutures and an anchor. If the ligament injury is a chronic condition that never healed correctly, then the ligament will be reconstructed with sutures, anchors, and an allograft (cadaver) tendon to remake your UCL ligament.

Surgery Information

Length of Stay

This is a same-day procedure – meaning once the surgery is done and you have recovered in our recovery unit (PACU) then you will go home. You will need someone available to stay in the facility during the day of your surgery and drive you home afterwards.

Anesthesia

You will typically receive two types of anesthesia for this surgery.

- General anesthesia: meaning you are asleep during the procedure
- Nerve Block: the anesthesiologist will place medicine around the nerves that go to your arm. This will cause the arm to feel numb and not move. This block is very helpful for pain control after surgery and will last for about 12-24 hours.

Incisions and Dressings

Your arm will be in a splint after surgery. The splint cannot get wet. I strongly recommend bathing over showering while in a splint, if possible. Over the counter splint and cast protectors can help prevent water getting into your splint during a shower, but they are not 100% waterproof as water may get in where the bag is sealed to your arm. Your splint will remain on until you see me in clinic.

Sling

When you wake up from surgery, a sling will be on your arm only for comfort while you are in a splint. You may remove the sling if you do not find it comfortable while you are in your splint.

Pain Control

Please review my “Post-operative medication” information sheet I provided or on my website. I prescribe many different medications after surgery to help control your pain in different ways.

Post-operative Appointment

I will see you at roughly the following intervals after surgery: 2 weeks, 6 weeks, 3 months, and thereafter until you return to play or are released to normal activities.

After your surgery, if you do not have a first post-operative visit appointment please call our office so we can schedule to see 10-14 days after surgery.

For any concerns, please contact my office

Please call my office if you begin to experience any of the following after surgery:

- Fever above 101.5 F
- Loss of motion or new onset numbness after surgery (your nerve block will be in place for approximately 24 hours after surgery)
- Excessive bleeding that is saturating the bandages
- Increased pain, increased redness around the incision, purulent drainage (thick, white drainage with a foul odor), or persistent drainage > 4 days.

Post-operative Rehab and Restrictions

Physical Therapy or Home Therapy

After surgery, you will be given home exercises to do daily – mainly wrist motion and squeezing a ball or rolled up sock (Elbow Phase I – home exercise program). These exercises are simple but help with swelling in your hand.

During your 2-week visit, you will be fitted for an elbow brace, and physical therapy will start to help regain motion in your elbow in a controlled manner. It is critical that you follow the rehab protocol carefully to allow your elbow to heal appropriately.