

BASEBALL REHAB NETWORK

UCL Injury Rehabilitation Guidelines

Important Notice — Please Read Before Using These Materials

What this document is

The Baseball Rehab Network UCL Injury Rehabilitation Guidelines and all accompanying exhibits and protocols (the “**Materials**”) are an educational reference for licensed healthcare professionals who work with baseball athletes recovering from ulnar collateral ligament (UCL) injuries. The Materials represent the collective clinical experience, professional opinion, and interpretation of published research by the authors as of the date of publication.

Who this document is for

The Materials are written for, and intended solely for use by, licensed and qualified healthcare professionals — including physicians, physical therapists, athletic trainers, and strength and conditioning specialists — operating within their own scope of practice and licensure. The Materials are not written for direct use by patients, athletes, parents, or coaches acting without professional supervision.

What this document is not

- It is not medical advice, a diagnosis, a treatment plan, or a prescription, and does not establish or define a standard of care.
- It does not create a physician-patient, therapist-patient, or any other clinical relationship between the authors and any reader or any reader’s patient.
- It is not a substitute for independent clinical judgment, appropriate diagnostic workup, surgical clearance, or individualized patient assessment.
- It is not an endorsement, warranty, or validation of any third-party product or technology referenced (including FlexPro Grip, Driveline PULSE, radar guns, force plates, or IMU sensors). Each clinician is responsible for independently evaluating any technology before clinical use.

How to use it

Any clinician who elects to apply these Materials — in whole, in part, or in adapted form — to the care of a specific patient does so on the basis of their own independent professional judgment and bears full responsibility for that clinical decision under their own license, malpractice coverage, and applicable standard of care. Nothing in the Materials overrides the clinician’s duty to assess the individual patient, obtain required medical and surgical clearances, and modify any protocol as clinical circumstances require.

Inherent risks, evolving science, and no responsibility for reliance

UCL rehabilitation involves inherent risks — including re-injury, graft failure, setback, and incomplete return to performance — that no protocol can eliminate. The Materials reflect the authors’ interpretation of the available evidence as of the date below; readers are encouraged to independently verify cited research and remain current with developments in the literature. The authors, contributors, and the Baseball Rehab Network make no representations or warranties, express or implied, regarding the accuracy, completeness, or clinical applicability of the Materials to any specific case, and accept no responsibility for any clinical decision, adverse outcome, re-injury, or rehabilitation result arising from any use of or reliance on the Materials.

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