

Ulnar Nerve Transposition

Surgical procedure: The ulnar nerve is relocated anteriorly to the medial epicondyle where it is no longer irritated or pinched by the bony prominence

Phase I (8 – 14 days post-op)

- Brace:
 - Pre-fab wrist cock-up brace
- ROM:
 - Removal of brace allowed hourly to perform light elbow and hand ROM within pain-free ranges to avoid stiffness
- Work:
 - Return to work with use of unaffected extremity only with operative extremity maintained in a sling while at work

Phase II (2 - 4 weeks post-op)

- Brace:
 - Continue brace use
- ROM:
 - Continue A/PROM for the elbow and hand within patient tolerance

Phase III (4 weeks post-op)

- Wound care:
 - Scar massage and desensitization may begin pending the wound is completely closed with no signs of infection and all sloughing material/eschar is gone.
- Brace:
 - Discontinue wrist cock up brace and begin wrist P/AROM

Phase IV (6 weeks post-op)

- ROM:
 - Continue A/PROM for the elbow wrist, and hand
- Work:
 - Advance to 5 lb. Weight restriction
 - No power gripping or vibratory tools

Phase V (6 - 8 weeks post-op)

- Strengthening:
 - Begin light strengthening to tolerance



Phase VI (10+ weeks post-op)

- Work:
 - Return to work without restrictions

Expectations: Variations in return to work can occur that are based on individual patient healing and rehabilitation variability in combination with job demands

Adapted From:

- 1) Diagnosis and Treatment Manual for Physicians and Therapists (The Hand Rehabilitation Center of Indiana), 2020.
- 2) Consultation with Dr. Brian Bear, MD at OrthoIllinois