HaysMed

Medial / Lateral Epicondylitis

General Principles:
This protocol was designed to provide the rehabilitation professional with a guideline of care. It should be stressed that this is only a protocol and should not be a substitute for clinical decision making regarding a patient's progression. Actual progression should be individualized based upon your patient's physical examination, progress, and presence of any complications.

PHASE I: (Immediate)

Orthotics-
1. Tennis elbow strap as needed
2. Consider wrist splint as needed for extremely symptomatic patients

Modalities (PRN)-
1. Ice Massage. Ice packs post-activity throughout protocol
2. Electrical Stimulation for pain and edema control
3. Pulsed Ultrasound
4. Phonophoresis with 10% Hydrocortisone cream or Iontophoresis with Dexamethasone if no relief with Ultrasound
5. Manual therapy/Astym

Exercises-
1. Passive and Active ROM for shoulder, elbow, forearm, and wrist in all planes
2. Grip exercises, add resistance as tolerated
3. Isometrics for the wrist, forearm, elbow
    a. Sub-max, Sub-painful
    b. Progress to isotonic strengthening when full, pain-free with isometrics
4. Passive wrist stretching in all planes
5. Evaluate exacerbating tasks for ADL modifications

PHASE II: (Intermediate)

Modalities (PRN)-
1. Continue Phase I modalities as needed

Exercises-
1. Progress Phase I exercises
2. Start with eccentric strengthening ex
3. Progress to isotonic resistance exercises for wrist, forearm, and elbow
4. Finger and grip strengthening

PHASE III: (Advanced)

Orthotics-
1. Tennis elbow strap for exercise only as needed

Modalities (PRN)-
1. Continue only as needed

Exercises-
1. Progress Phase II exercises
2. Functional sport and work activities
3. Home exercises program / task modification to minimize risk of recurrence
4. Dismiss from formal rehabilitation when functional goals have been met

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