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REHABILITATION GUIDELINES FOR LATERAL EPICONDYLE DEBRIDEMENT

PHASE I (DAYS 1-7)

DOS:

Appointments	Begin physical therapy 3-5 days after surgery 1-2 x per week
Rehabilitation Goals	<ul style="list-style-type: none"> • Maintain integrity of the surgical repair • Diminish pain and inflammation: Apply ice for 20 minutes 2-3 times/day • Prevent muscular inhibition • Independent with ADLs with modifications to protect repair
Precautions	<ul style="list-style-type: none"> • Position extremity in sling for comfort • Minimize ADL's that stress the extensor mechanism such as lifting and combined joint movements (i.e. full elbow extension with wrist flexion). • Modify work and activities, encouraging pt to perform tasks with palm up. • Consider pre-fab/custom wrist splint to minimize wrist extension activities if painful. • Elbow pad for protection of incision site
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> • Gentle hand, wrist, and elbow range of motion (ROM) exercises. <ul style="list-style-type: none"> ◦ Exercises should be done in a pain-free ROM. • Active shoulder ROM • Periscapular exercises
Cardiovascular Exercises	<ul style="list-style-type: none"> • NA, safe walking while wearing sling okay

PHASE II (2-4 WEEKS)

DATES:

Appointments	Continue physical therapy 2 x week
Rehabilitation Goals	<ul style="list-style-type: none"> • Edema and inflammation control: Continue with ice application 20 minutes two to three times a day. Tubigrip as needed. • Scar management as needed
Precautions	<ul style="list-style-type: none"> • Discontinue sling • Continue work and activity modifications
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> • Begin PROM and AAROM within pt's pain tolerance • Gentle strengthening with active motion and sub-max isometrics
Cardiovascular Exercises	<ul style="list-style-type: none"> • Light UBE, beginning with AAROM progressing to resistance as tolerated • Walking



PHASE III (WEEKS 5-7)

DATES:

Appointments	Continue physical therapy 1-2 x week
Rehabilitation Goals	<ul style="list-style-type: none"> • Full ROM • Progressing strength and function
Precautions	<ul style="list-style-type: none"> • Edema and inflammation control with ice application for 20 minutes after activity.
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> • Advanced strengthening as tolerated to include weights or theraband. Focus should be on endurance training of wrist extensors (i.e. light weights, higher repetitions). • AAROM and PROM at the elbow • Gentle massage along and against fiber orientation. • Counterforce bracing to common extensor tendon of forearm. (Including education on proper use to avoid nerve compression.)
Cardiovascular Exercises	<ul style="list-style-type: none"> • Walking, stationary bike, jogging
Progression Criteria	<ul style="list-style-type: none"> • Full, painfree ROM without compensatory movements

PHASE IV (WEEKS 8-12)

DATES:

Appointments	Continue physical therapy 1-2 x week
Rehabilitation Goals	<ul style="list-style-type: none"> • No compensatory movements present • Rehab geared toward return to sport or work
Precautions	<ul style="list-style-type: none"> • Begin gradual return to previous sports/activities/work duties under controlled conditions • Continue counterforce bracing if needed for patient to completed ADLs and/or strengthening activity pain-free.
Suggested Therapeutic Exercises	<ul style="list-style-type: none"> • Advanced strengthening with weights, dumbbells, and bands to include muscles of the shoulder girdle, rotator cuff, and periscapular areas • May begin functional training exercises such as swimming, tennis, or an interval throwing program
Cardiovascular Exercises	<ul style="list-style-type: none"> • As tolerated
Progression Criteria	<ul style="list-style-type: none"> • Full return to sports/activities/full work duties are pending MD approval based upon: <ul style="list-style-type: none"> ○ Full functional ROM ○ No pain or tenderness ○ Symmetric muscular strength