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Lateral Epicondylectomy

Phase I: Days 1-7

- Movement of the wrist and fingers for 2 minutes, 3-5x/day
- Ice and NSAIDs are utilized for pain control
- The patient is also educated on the signs of wound infection; including excessive swelling, redness, excessive heat, oozing from the incision, a dramatic increase in pain or a fever greater than 100° for more than one day
- Day 3 shoulder ROM is started.

Phase I: Days 7-17

- More aggressive ROM is encouraged in and out of the shower
- Goals for day 17 are 80% of normal elbow ROM
- The arm can be used for light activity only

Phase I: Days 18-21

- Sub maximal Isometrics are started
- The patient begins antigravity wrist flexion, extension, supination and pronation without pain
- If painful the patient is instructed to utilize a counterforce brace during exercising
- Once the patient can perform 30 repetitions, without pain, they can progress to a 1-pound weight or light resistance band. All exercises are performed with the elbow bent to 90° and resting on a table or the lower extremity

Phase II: Weeks 3 - 6

Goals: Pain level less than pre-surgery level

Full ROM.

• Therapeutic exercises:

Rotator cuff, elbow and scapular stabilization training with light resistance

Aerobic conditioning on a stationary bike or treadmill

Light stretching is encouraged at this stage with emphasis on end range and passive overpressure

Progressive resistive exercises – strengthening wrist flexion, extension,

supination/pronation, ulnar and radial deviation. Progress the patient from a flexed and elbow supported elbow to a fully extended and unsupported elbow

Pain free grip strengthening with putty or ball

Utilize counterforce brace during exercise if pain continues

- Gentle soft tissue mobilization/massage along and against fiber orientation
- Consider use of ice after exercise.

Phase III: Weeks 8 - 12

- Begin task specific functional activities
- Return to sport activities
- Continue counterforce bracing if needed
- Continue wrist, elbow, shoulder and scapular strengthening
- Patient is allowed to return to athletics once their grip strength is normal.