

Lateral Epicondylitis PT Protocol

- Wrist Immobilizer 4 weeks

Phase I – Maximum Protection (0 to 10 days):

- Sling for 2 weeks for comfort
- Ice continuously
- Gentle layer I skin and scar mobilizations
- Patient education
- Passive range of motion for elbow flex/ext and forearm pronation/supination

Phase II – Progressive Stretching and Active Motion (10 days to 4 weeks):

- 10 days to 2 weeks:
 - o Discontinue sling at 2 weeks
 - o Modalities as needed for inflammation
 - o Advance tissue mobilizations within tolerance over common extensor tendon
 - o Begin passive wrist range of motion in all planes as tolerated
 - o Begin active shoulder range of motion, emphasize protraction and retraction
- Weeks 2 to 4:
 - o Continue modalities to control inflammation
 - o Initiate terminal ROM stretching as tolerated
 - o Begin composite stretching of ECRB and EDC (elbow extension, forearm pronation and wrist flexion)
 - o Begin active-assistive ROM in elbow, wrist and hands in all planes
 - o Light ADLs and work activities as tolerated

Phase III – Early Strengthening (Weeks 4 to 6):

- Modalities as needed
- Continue with elbow and wrist terminal stretching in all planes
- Begin active ROM of the elbow and wrist in all planes
- Initiate submaximal isometrics of the extensor bundle
- Begin PREs of the flexor/pronator mass when the patient is able to perform full composite stretch pain free
- Begin rotator cuff and scapular strengthening program with resistance applied above the wrist
- Scapular stabilization exercises
- Proprioception and neuromuscular control drills
- Core activities o Manual resistance and PNF patterns

Phase IV – Advanced Strengthening and Plyometric Drills (Weeks 6 to 10):

- Weeks 6 to 8:
 - o Continue with end range stretching
 - o Begin wrist and forearm strengthening in all planes, avoiding aggressive wrist extension exercises until week 10 to 12
- Weeks 8 to 12:
 - o Begin global upper extremity gym strengthening program 3-4 times per week in preparation for return to full work and sports activities
 - o Push-up progression
 - o Initiate plyometric drills (plyoball wall drills)



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- Double arm rebounder drills progressing to single arm Return to sport program per physician approval