

# Sports & Orthopaedic Specialists Lateral & Medial Epicondylitis Protocol

This protocol provides appropriate guidelines for the rehabilitation of patients with medial or lateral epicondylitis. The protocol draws evidence from the current literature and accounts for preferences of the providers at Sports & Orthopaedic Specialists. The program may be modified by the referring provider for an individual patient. If questions arise regarding the utilization of the protocol or the progress of the patient, contact Sports & Orthopaedic Specialists:

Main line: (952) 946-9777

Physical therapy: (952) 914-8631

## **Evaluate the Shoulder:**

Treat scapular dyskinesis and rotator cuff deconditioning if present (Impingement Protocol).

## Eccentric Wrist Extensor Strengthening (Lateral Epicondylitis):

-High local tissue irritability: Gravity-reduced activation of wrist extensors.

-Moderate local tissue irritability: Concentric assist / 5 second eccentric lowering against gravity

-Low local tissue irritability: Concentric assist / 5 second eccentric lowering with manual resistance or 1-2# free weight

## Eccentric Wrist Flexor Strengthening (Medial Epicondylitis):

-High local tissue irritability: Gravity-reduced activation of wrist flexors.

-Moderate local tissue irritability: Concentric assist / 5 second eccentric lowering against gravity

-Low local tissue irritability: Concentric assist / 5 second eccentric lowering with manual resistance or 1-2# free weight

## Mobilization with Movement (Lateral Epicondylitis):

Lateral glides with concurrent gripping activity

## Soft Tissue Mobilization:

Transverse Friction: Distal to appropriate epicondyle Additional soft tissue techniques as clinically necessary.

## Ice Cup:

Over origin of common extensor tendon. Three to 5 minutes until pink and numb.