

PROTOCOL FOR TENNIS ELBOW AND GOLFERS ELBOW RELEASE (LATERAL / MEDIAL RELEASE OF ELBOW)

AIMS OF TREATMENT IN THE EARLY STAGE

- Protect the surgery site
- Reduce swelling and pain
- Maintain range of motion of elbow and wrist

Inpatient

- Sling for 48 hours
- Advice on use of icepacks at home
- Active elbow flexion, extension, pronation and supination
- Active wrist flexion and extension without gravity

AIMS OF TREATMENT FOR THE MID STAGE

Out-patient - 2 - 6 weeks post-op

- Correct posture
- Give ergonomic advice for return to work on light activities e.g. office duties
- Progressive stretching of wrist extensors
- Elbow strengthening into flexion / extension
- Graduated resistance programme for wrist extension / flexion. All exercises should be in pain free ROM with good quality movement and muscle activation, (remembering mid prone position)
- Eccentric protocol initially
- Progress to concentric loading
- Graduated strengthening program into pronation
- Grip strengthening exercises
- Ensure adequate pain control
- Correct movement patterns

May need to include:

- Taping
- Check neurodynamics and treat as required
- Manual therapy to mobilise the radial head.
- Trigger point release techniques

AIMS OF TREATMENT FOR THE ADVANCED STAGE

- Increase strength, stamina and speed
- Return to full function work and sport
- Return to racket sports at 12 weeks

6. - 12 weeks post-op

- Increase heavy loading > 2kg
- Functional exercises for work and sport

Milestones:

2/52 Return to work for sedentary / low manual jobs

6/52 Full ROM wrist and elbow

2-6/52 Driving dependent on pain levels and ROM

6/52 Return to work for manual jobs

6/52 Swimming any stroke

3/12 Racquet sports

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