Physical Therapy Protocol

Lateral Epicondylitis – Non-Operative Management

General Instructions

- Focus on active range of motion (AROM) of the elbow, forearm, and wrist
- Emphasize stretching of wrist extensors, especially at the extensor origin
 - o To maximize stretch:
 - Elbow extended
 - Forearm pronated
 - Wrist fully flexed

Strengthening Guidelines

- Begin strengthening only after pain-free stretching is possible
- Emphasize eccentric strengthening of the wrist extensors
- All wrist extensor exercises should be performed with:
 - Elbow flexed
 - Hand relaxed (not in a fist)
 - o This helps avoid increasing lateral elbow pain

Progression:

- 1. Submaximal isometric exercises
- 2. Resistance bands
- 3. Weights as tolerated

Treatment Focus

- Progress from flexibility → strength → endurance
- Provide patient instruction on counter-force bracing
- Issue and review a personalized Home Exercise Program (HEP)

Adjunct Therapy

- Apply heat before exercise and ice afterward
- Provide soft tissue massage:
 - o Along and against the muscle fiber orientation

Modalities

(Per therapist's preference)

- Iontophoresis
- Heat and Ice
- Massage
- Dry needling
- Instrument-Assisted Soft Tissue Mobilization (IASTM)
- Mulligan mobilizations
- Kinesiology taping (KT taping)

Progression Guidelines

- Progress exercises and activity as tolerated
- Emphasize comfort, inflammation control, and gradual return to normal function

Treatment Plan

• Frequency: 2–3 times per week

• **Duration:** 6 weeks