

**PHYSICAL THERAPY PROTOCOL
PROCEDURE: TENNIS ELBOW DEBRIDEMENT/REPAIR**

- **Weeks 1-2: Recovery Phase**
 - Cock-up Wrist Splint: At all times except for showering and exercise
 - Exercises:
 - AROM wrist/elbow/hand
 - No resisted wrist extension
 - Scapular “pinches”
 - Pain free submaximal biceps/triceps isometrics
 - Modalities as needed

- **Weeks 3-4: Joint Mobilization Phase**
 - Wrist Splint: Worn as needed for comfort
 - Counterforce Strap: Worn activities requiring repetitive use of extremity
 - Exercises:
 - Begin PROM & AAROM with goal of full elbow ROM within patient’s pain tolerance
 - Modalities as needed for pain, edema, inflammation control
 - Gentle strengthening exercises with submaximal isometrics
 - No lifting with arm outstretched and forearm pronated
 - Advancement Criteria:
 - Symmetric elbow ROM
 - Minimal pain and inflammation

- **Weeks 5-8: Initial Strengthening Phase**
 - Exercises:
 - A/AAROM for full elbow, forearm, and wrist motion
 - Begin isotonic strengthening
 - Begin gentle resisted wrist extension; advance as tolerated but avoid pain
 - Advance biceps/triceps strengthening
 - Ice 20 minutes daily after activities
 - Manual or other deep tissue therapies as indicated
 - General upper extremity flexibility exercises
 - Advancement Criteria:
 - Full upper extremity ROM
 - 5/5 strength throughout (except wrist extension)
 - Minimal pain and inflammation

- **Weeks 9+: Advanced Strengthening Phase**
 - Counterforce Strap:
 - Continue as needed to complete ADLs or other activities pain-free
 - Exercises:
 - Begin more aggressive strengthening
 - Advance full upper extremity strengthening program
 - Continue upper extremity flexibility exercises
 - Begin sport or activity related functional training program
 - Address trunk and lower extremity demands
 - Return to full, unrestricted activities at 3 months post-op

- **Discharge Criteria:**
 - Isokinetic strength >90% uninvolved side
 - Independent HEP
 - Independent, pain-free sport or activity specific program