

Lateral Epicondylar (Tennis Elbow) Surgical Protocol

Mark Ayzenberg, MD, FAAOS

Phase I (Post-op Weeks 0–2) Protection and Pain Control Phase

- Posterior splint or soft dressing for comfort during the immediate postoperative period
- Elbow range of motion as tolerated, avoiding terminal extension initially if uncomfortable
- No resisted wrist extension or forearm supination
- No lifting, gripping, or repetitive use of the operative arm
- Active range of motion of shoulder, elbow, wrist, and hand encouraged within comfort
- Edema control, elevation, and pain management emphasized

Phase II (Weeks 2–6) Early Motion Phase

- Discontinue splint; use counterforce brace or wrist splint as needed
- Progress elbow range of motion to full as tolerated
- Begin gentle wrist and forearm stretching
- Initiate light isometric strengthening of wrist extensors with elbow flexed
- Continue to avoid resisted gripping or heavy lifting
- Scar management and soft tissue mobilization as indicated

Phase III (Weeks 6–12) Progressive Strengthening Phase

- Progress to isotonic strengthening of wrist extensors and forearm musculature
- Begin eccentric strengthening program for wrist extensors
- Gradually reintroduce gripping activities
- Advance forearm pronation and supination strengthening
- Functional use of the arm for light activities of daily living
- Avoid forceful or repetitive activities that provoke pain

Phase IV (Weeks 12–16) Advanced Strengthening and Function

- Advance strengthening and endurance training
- Progress eccentric and concentric wrist extensor loading
- Introduce work- or sport-specific drills
- Gradual return to recreational activities
- Emphasize proper mechanics and load management

Phase V (Weeks 16–20+) Return to Activity

- Return to unrestricted work and sport activities as tolerated
- Gradual return to sports and heavy labor
- Progression based on pain-free motion, strength, endurance, and functional confidence



****Special Considerations:****

- This protocol applies to open or arthroscopic lateral epicondylar release with extensor tendon repair.
- Avoid aggressive strengthening or premature return to repetitive gripping early in rehabilitation.

****Progression Criteria:**** Advancement through phases is criteria-based and dependent on pain control, restoration of motion, tendon healing, strength, and tolerance of functional activity.