



A Part of UTHealth Bonnie P. Gregory, MD LITTLE LEAGUER'S ELBOW/MEDIAL EPICONDYLITIS PT PROTOCOL

	Range of Motion	Brace/Sling	Exercise/Strength
PHASE I Weeks 0-4 Goals: 1. Decrease acute inflammation 2. Promote tissue healing 3. Retard muscular atrophy	Early gentle ROM Progress as tolerated to full ROM: PROM→AAROM→AROM	May use a counterforce distribution strap	 Stretching wrist extension/flexion, elbow extension/flexion, supination/pronation Isometrics wrist extension/flexion, elbow extension/flexion, supination/pronation Progress to gentle active ROM and light strengthening with bent elbow May use noxious pain ESTIM prior to isotonic exercises Soft tissue massage to muscle belly and surrounding muscles (avoid tendon) Avoid painful movements (ie, gripping, etc) May continue with shoulder stretching, manual resistance shoulder exercises (no gripping), lower extremity, core, and conditioning workouts
PHASE II: Weeks 5-8 Goals: 1. Create a healing response 2. Improve soft- tissue flexibility 3. Increase muscular strength/endurance 4. Increase tolerance to functional activities	Full ROM	None	 Progress above exercises Shoulder, scapula, elbow, wrist, and forearm isontonics, gradually increase weight Progress to wrist isotonics with a straight elbow Begin with concentric contractions and progress to include eccentrics Progress to elbow, wrist, and forearm manuals Soft tissue massage to muscle belly and surrounding muscles, progress to transvers friction massage to tendon area May begin light wrist flips and wall dribbles



			 Criteria for progression to phase III: No pain or inflammation • At least 4+/5 strength throughout upper extremity
PHASE III: >8 weeks Goals: 1. Improve muscular strength and endurance 2.Maintain and enhance flexibility 3. Gradual return to baseball/sport activities	Full ROM	None	 Continue strengthening and manual exercises (emphasize eccentric contractions) Continue to emphasize deficiencies in shoulder and elbow strength Continue flexibility exercises Continue soft tissue massage to muscle belly and surrounding muscles including transverse friction massage to tendon Continue wrist flips and wall dribbles Gradually decrease use of counterforce brace Progress to interval hitting and/or throwing program – continue above exercises throughout program, specifically warmup of heat, ultrasound, massage, and stretch <i>PRIOR</i> to throwing Criteria to begin interval hitting and/or throwing program: No pain or tenderness with palpation Good soft tissue flexibility 5/5 strength throughout upper extremity Satisfactory clinical examination

For any questions or concerns regarding the protocol or rehabilitation process please contact: Dr. Gregory's Office: Phone: 713-486-7080 Fax: 713-452-4143 <u>https://www.bonniegregorymd.com/</u>