

UVA HAND CENTER - THERAPY

Lateral Epicondylectomy Post-Op Guidelines

1st Post-Op Visit (2 weeks)

- ***Surgical follow-up visit with attending surgeon***
 - Post-Op dressing removed
 - Sutures removed
 - New sterile dressing applied
- ***Therapy follow-up***
 - Long arm splint fabricated (elbow flexion 90 degrees, wrist 20-30 degrees extension, forearm neutral)
 - Begin scar management (issue cica care)
 - AROM exercises for shoulder, elbow, forearm, and hand (**no wrist**)
 - Begin gentle PROM to restore elbow extension
 - Edema control as indicated (ex. tubi-grip/isotoner glove)
 - Schedule therapy 1-3x/week at therapist discretion

Therapy Visit (3 weeks Post-Op)

- Begin wrist ROM

Therapy Visit (4 weeks Post-Op)

- Therapist decides to continue long arm splint or discharge the long arm splint. If it is discontinued, a forearm based resting splint should be issued. This splint can be custom made or pre-fabricated to provide proper static positioning of the wrist.
- Continue AROM exercises of the wrist both in and out of clinic

MD Visit (6 weeks Post-Op)

Therapy Visit (6 weeks Post-Op)

- Begin strengthening program with work conditioning activities to follow if patient remains pain free.
- Discharge long arm splint if it was not discontinued at week 4

MD Visit (12 weeks Post-op)