

Chapter 32

Medial Epicondylitis

Nonoperative

4–8 Weeks

- A wrist immobilization splint is applied in neutral to 10° volar flexion for 4–8 weeks for continual wear. If the symptoms persist, prolonged splinting may be necessary.
- Some patients not effectively managed with wrist splinting alone may require a static elbow splint, which secures the forearm in a neutral position with the elbow flexed at 90°.

8–12 Weeks

- As the symptoms become quiescent, progressive resistive exercise may be initiated. This may include use of the BTE, Nirschl exercise program, and theraband.

Discharge Criteria

- Patient will be able to perform ADLs without pain.
- Average number of visits—6.