

Elbow Medial Epicondylar Debridement

Surgical Procedure: Following an incision over the medial epicondyle, the pathologic tissue along the flexor muscle/tendon origin is excised.

Post-op Instructions:

- 48 hours post-op: bulky and compressive dressing may be removed and a light compressive dressing can be applied to the hand, forearm, and above the elbow
- No lifting, carrying, power gripping, or vibratory tools
- Brace:
 - A wrist cock up brace is issued, to be worn at all times for 4 weeks except for bathing and performance of HEP
 - An optional elbow pad can be fitted to protect the elbow

1-4 weeks:

- Gentle AROM of elbow, forearm, wrist, and digits may begin
- Return to work utilizing non-surgical extremity only
- Wound care: Within 48 hours of suture removal, scar massage is initiated along with Elasoher, Roylan, etc (prn)
- Modalities: Moist heat, ice, and modalities prn
- Edema: Elastic stockinettes or elastic bandages may be utilized once the edema begins to subside
- Full finger AROM encouraged and expected

4-8 weeks:

- Brace: Discontinue wrist cock up brace
- ROM: Begin PROM of all wrist/FA/hand planes to patient tolerance

8 weeks:

- Continue with no power gripping or vibratory tool use
- Strengthening:
 - Begin gentle strengthening as tolerated
 - 5 lb. Weight restriction

14-16 weeks:

- Return to work without restriction

Adapted From:

- 1) Consultation with Dr. Brian Bear, MD at Orthollinois