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## **Physical Therapy for Little Leaguer’s Elbow (Medial Epicondylitis)**

The following is a basic framework from which to work during rehabilitation for medial epicondylitis. Physical therapists may employ specific exercises at their discretion within these guidelines. We encourage patients and therapists to communicate with Dr. Brusalis and his staff with any questions.

Please provide with a home exercise program to be perform throughout rehabilitation.

Phase	Goals	Range of Motion	Guidelines
<b>I</b> <i>Weeks 0-4</i>	<ol style="list-style-type: none"> <li>1. Decrease acute inflammation</li> <li>2. Promote tissue healing</li> <li>3. Slow muscular atrophy</li> </ol>	Early gentle ROM, progress as tolerated to full ROM	<ul style="list-style-type: none"> <li>• Stretching wrist extension/flexion, elbow extension/flexion, supination/pronation</li> <li>• Isometrics wrist extension/flexion, elbow extension/flexion, supination/pronation</li> <li>• Progress to gentle active ROM and light strengthening with bent elbow</li> <li>• May use noxious pain ESTIM prior to isotonic exercises</li> <li>• Soft tissue massage to muscle belly and surrounding muscles (avoid tendon)</li> <li>• Avoid painful movements (ie, gripping, etc)</li> <li>• May continue with shoulder stretching, manual resistance shoulder exercises (no gripping), lower extremity, core, and conditioning workouts</li> </ul>

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Phase	Goals	Range of Motion	Guidelines
<b>II</b> <i>Weeks 5-8</i>	1. Create a healing response 2. Improve soft-tissue flexibility 3. Increase muscular strength/endurance 4. Increase tolerance to functional activities	Full	<ul style="list-style-type: none"> <li>• Progress above exercises</li> <li>• Shoulder, scapula, elbow, wrist, and forearm isotonics, gradually increase weight</li> <li>• Progress to wrist isotonics with a straight elbow</li> <li>• Begin with concentric contractions and progress to include eccentrics</li> <li>• Progress to elbow, wrist, and forearm manuals</li> <li>• Soft tissue massage to muscle belly and surrounding muscles, progress to transvers friction massage to tendon area</li> <li>• May begin light wrist flips and wall dribbles</li> </ul> <p><u>Criteria for progression to phase III:</u></p> <ul style="list-style-type: none"> <li>• No pain or inflammation</li> <li>• At least 4+/5 strength throughout upper extremity</li> </ul>

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Phase	Goals	Range of Motion	Guidelines
<b>III</b> >8 Weeks	<ol style="list-style-type: none"> <li>1. Improve muscular strength and endurance</li> <li>2. Maintain and enhance flexibility</li> <li>3. Gradual return to baseball/sport activities</li> </ol>	Full	<ul style="list-style-type: none"> <li>• Continue strengthening and manual exercises (emphasize eccentric contractions)</li> <li>• Continue to emphasize deficiencies in shoulder and elbow strength</li> <li>• Continue flexibility exercises</li> <li>• Continue soft tissue massage to muscle belly and surrounding muscles including transverse friction massage to tendon</li> <li>• Continue wrist flips and wall dribbles</li> <li>• Gradually decrease use of counterforce brace</li> <li>• Progress to interval hitting and/or throwing program – continue above exercises throughout program, specifically warm---up of heat, ultrasound, massage, and stretch PRIOR to throwing</li> </ul> <p><u>Criteria to begin interval hitting and/or throwing program:</u></p> <ul style="list-style-type: none"> <li>• No pain or tenderness with palpation</li> <li>• Good soft tissue flexibility</li> <li>• 5/5 strength throughout upper extremity</li> <li>• Satisfactory clinical exam</li> </ul>