

## Elbow Rehabilitation Post-Repairative Medicine Treatment

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- First Days Post Treatment
  - **Keep the treated arm in the sling for the prescribed number of days**, which depends on the specific treatment as well as the type and severity of the elbow injury. (Typically, 2 to 3 days.)
  - It is very important during this time not to use or load the elbow. This includes opening doors, using the arm to drive and pick up items. The concept here is that the treatment was precisely placed into the tear or injury site and loading the elbow during this critical phase may displace the treatment. When muscles or tendons are loaded, they squeeze tightly together: picture wringing out a wet dishcloth (which we want to avoid during this phase).
  - During this time the sling may be carefully adjusted for comfort but should continue to support the forearm. If desired, once or twice a day the sling may be carefully removed to use a washcloth to clean the arm pit with the arm hanging down. You may gently roll your shoulders, stretch your neck and place additional padding under the sling as needed for comfort.
  - Leave the sling on loosely while sleeping to prevent your arm from flailing during sleep. It may help to place a pillow under your knees.
- Once Out of the Sling; for the next 2 to 3 weeks (these exercises will help prevent developing shoulder stiffness)
  - Hanging Arm Circles
    - Bend over so the arm hangs free and make a slow easy circular motion with the hanging arm. Start with small circles and as the shoulder loosens up gradually make larger circles. Do about 15 to 20 circles clockwise and then counter clockwise. Do these 4 to 6 times a day. Fully bend and straighten the elbow before and after these sessions!
  - Wall Walks
    - Stand closely facing into a wall. Bend the elbow on the affected arm so the palm faces the wall in front of you. Using your middle and index fingers as “legs” slowly walk the hand up the wall. The goal is to get the arm fully extended over-head, but this may take a few days to get this range of motion back. The shoulder may be stiff, and this will be uncomfortable, but getting your range of motion back in your shoulder is a critical step in your recovery. Each time walk the hand a little higher on the wall. Repeat this same action, but for this variation, stand sideways to the wall with your injured arm facing the wall. Walk the fingers up the wall while pressing the side of your body in the wall.
- Guidance for Physical Therapy (PT)
  - Start PT at two to three weeks. The initial goal will be to restore full range of motion, followed by strengthening and stabilization of the entire upper extremity kinetic chain and upper core. Depending on the specific

pathology affecting the elbow, you may progress to eccentric strengthening of either the wrist extensors (tennis elbow) or wrist flexors (golfer's elbow). While you may only attend PT 1-2 days per week, your prescribed exercises should be completed a total of 4-5 days per week. Some brief (10 minutes or less) period of heat or ice therapy will not hurt the therapy, but it is not required. Avoid modalities such as any form of laser or electrical stimulation. Dry needling is fine if needed.

- During this time, avoid aggravating activities. Exercise is vital to good health and finding a way to cross train around your injury is important not only for your physical health, but for your mental health as well. Ask me about cross training options for your injury. While lower extremity focused cardiovascular exercise is likely OK to begin, rowing and elliptical machines will place greater stress on the treated upper extremity and should first be discussed with your treating physician.