

## CLINICAL CASE REPORT

# Treatment of a Forty-six-year-old Male with Lateral Epicondylitis

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### Patient History

A 46-year-old, athletically active male had persistent pain symptoms for over 6 months. He had undergone physical therapy, received one steroid injection, and was taking nonsteroidal anti-inflammatory drugs (NSAIDs) for pain relief.

Physical examination and ultrasound imaging were consistent with the diagnosis of chronic lateral elbow tendinopathy.

### Ultrasound-guided Tenotomy

The patient was eager to find resolution and relief to his chronic pain symptoms and opted to undergo a minimally invasive tenotomy procedure using the TenJet™ device instead of open or arthroscopic surgery.

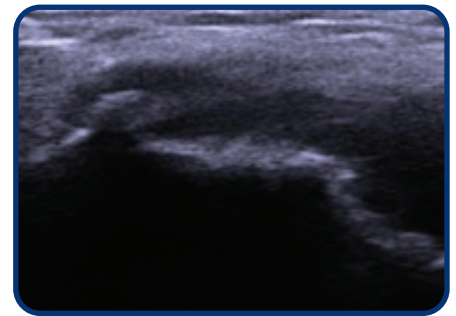
Following standard procedures, the patient was draped, and the procedure site was prepped. Under ultrasound guidance, the TenJet device was advanced to the tendon pathology and run for 3 minutes at setting 8 until the diseased tissue was removed and the tendon appearance was uniform and isoechoic. The total procedure time was 45 minutes.

### Post-procedure Follow Up

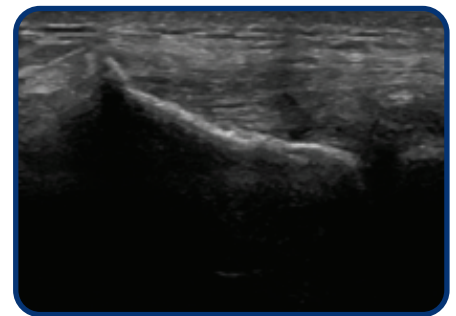
The patient was instructed to undergo physical therapy with eccentric loading after the 2-week follow-up visit for a period of 4 weeks.

Visual Analog Scale (VAS) pain scores for this patient improved from 7 (baseline) to 4 at 2 weeks and 1 at 6 weeks. The patient remained pain free at 3 and 6 months.

Patient Rated Elbow Evaluation (PREE) function scores improved by 42% at 2 weeks, 89% at 6 weeks, and 100% at 3 and 6 months.



**Figure 1.**  
Pre-procedure diagnostic ultrasound imaging shows a small area of hyperechoic calcific debris within the lateral most insertion of extensor tendon.



**Figure 2.**  
Six-month follow up ultrasound shows a small enthesophyte off the lateral epicondyle, but no hyper or hypoechoic tendon.