



CARPAL TUNNEL | TRIGGER FINGER | CUBITAL TUNNEL DUPUYTREN'S | DE QUERVAIN'S RELEASE

REHABILITATION PROTOCOL

REHABILITATION PROGRESSION

The following is a general guideline. Please consult Dr. Syal/Dr. Soswa if there is any uncertainty concerning advancement of a patient to the next phase of rehabilitation. Rehabilitation should be individualized according to patient status.

PRECAUTIONS

- Early ROM exercise to prevent stiffness and scar tissue

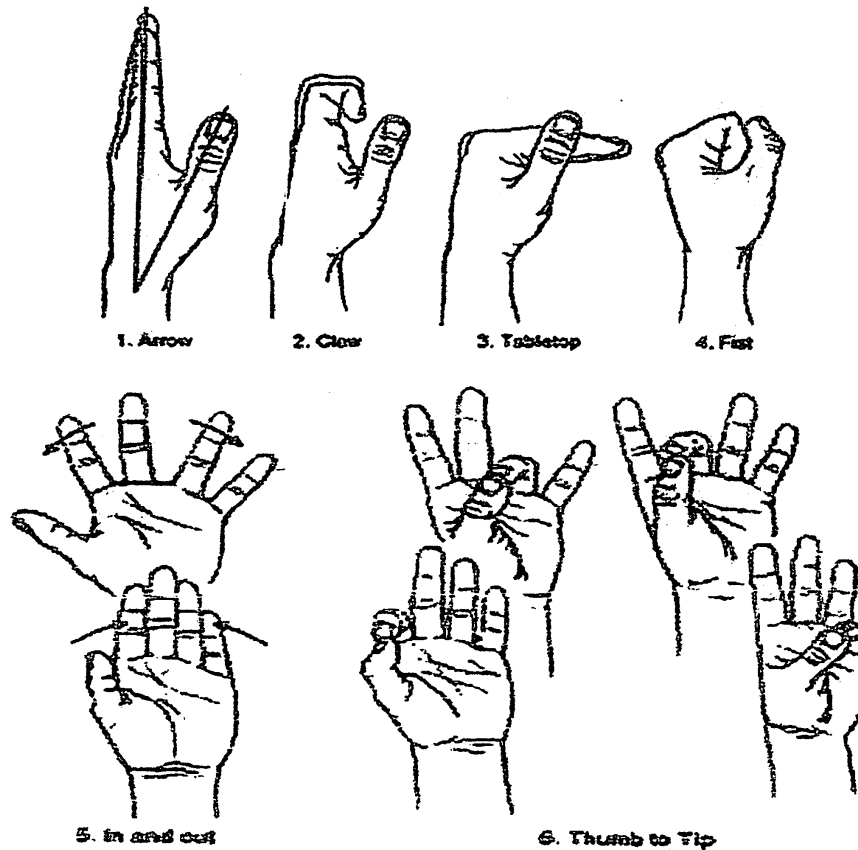
PHASE I (WEEK 0-2)

- Early ROM exercises as per handout
- Limit weight through hand to 1 lbs.
- Pain medications as required

PHASE 2 (WEEKS 3-FULL RECOVERY)

- Continue with ROM exercises
- Gradual increase in weight through hand
- Physiotherapy as required
- Gradual return to full activity

"Six-Pack" Exercises



- Perform each of these exercises 10 times each hour during the day (20-30 times first thing in the morning)
- Keep hand/arm elevated above heart level for 2 to 3 days
- Keep dressing/hand dry and clean until stitches are removed (usually 10-12 days post op). This means inserting the hand/arm in a plastic bag held in an upright position (with tips of fingers at the closed end of the bag) for showering. **ABSOLUTELY NO GETTING THE DRESSING WET.** If accidentally wet, go to the Emergency Dept. for a dressing change immediately. **ABSOLUTELY NO TAKING THE SPLINT OFF.**
- Take Tylenol Extra Strength, Advil, or Aleve 500 mg twice daily (as prescribed on the package) for pain if needed unless a prescription has been given for pain medication.
- Regular diet, activities as discussed with your surgeon.
- **INFECTION:** if the surgical site becomes increasingly painful, pink/red, increasingly warm, or circulation is impaired, go to your local Emergency Dept.
- Call your surgeon's office to book a follow up appointment in the office. If your operation involves hand/wrist bones with pins/plates you will be seen in the Cast Clinic.