

FLEXOR TENOLYSIS PROTOCOL

Goals of therapy: (1) minimize post-operative edema (2) protect surgical incision site, and frayed tendons, if necessary (3) maximize range of motion and strength (4) minimize scar adhesions.

1 day post-op:

- Remove post-op dressings
- Wound care and dressing change, as needed
- Edema reduction techniques with co-ban wrap
- Begin active digit flexion and extension on an hourly basis
 - Include isolated flexor tendon glide exercises for FDS and FDP
- Fabricate static extension splint for protection and for night-use
- Consider MP blocking ‘exercise’ splint to promote isolated tendon glide and to reduce chance of patient returning to previous motor pattern of intrinsic-plus or superficialis pattern

2 weeks post-op:

- Begin scar management techniques when sutures removed at 10 to 14 days
- Advance exercise program to minimize scar formation
- Begin gentle strengthening

Frayed tendon protocol

If flexor tendon is found to be frayed or fragile during tenolysis procedure, early active motion should be delayed for 2 weeks. Place and hold exercises are initiated at first post-op visit. Based on the integrity of the tendon, a dorsal blocking splint may be required. Strengthening is delayed for 6 weeks.