



(DIP) Distal Interphalangeal Joint Fusion

Dr. Bakker's Post-op Protocol

IMPORTANT INSTRUCTIONS FOLLOWING SURGERY:

- After surgery, your forearm and hand will be in a large bandage and plaster splint. Please **DO NOT** remove this. Try to keep your bandage clean and dry.
- To minimize swelling, you must keep your hand lifted up to your shoulder level.
- When sitting or lying, you should use pillows to support your surgically affected extremity, especially when sleeping.

REFERRAL TO HAND THERAPY:

- You will be instructed to make an appointment with Hand Therapy (OT) 1 week from your surgery. Depending on the clinic where hand therapy will be performed, please contact our Edina office at 952-456-7000 or our Plymouth office at 763-520-7870, to schedule.

WEEKS 0-1:

- Perform gentle range of motion of your finger joints.
- Ice 20-30 minutes three times daily.
- Transition to Tylenol.
- Attend hand therapy (OT) at one week post-operatively for the fabrication of a custom removable hand-based splint. The therapist will guide you in a therapeutic exercise program.
- The custom splint is fabricated to maintain alignment, this should be worn continually for the initial 4 weeks post operatively.

WEEKS 1-2:

- Discontinuation of narcotics is expected, continue with Tylenol and ibuprofen as needed.
- Continue with Hand Therapy and the use of the custom splint regularly.
- Avoid use of the affected finger in light functional activities.

- Return to the clinic at the end of week two for re-evaluation and suture removal if applicable.

WEEKS 2-6:

- Continue with OT with the goals of increasing range of motion, scar tissue management, and decreasing pain/inflammation.
- The custom splint will continue to be worn with activities.
- Avoid power grasping with your injured hand.

WEEKS 6-8:

- Return to clinic at six weeks post-operatively for re-evaluation, repeat imaging and pin removal.
- Continue with OT with the goals of improving strength and pain free range of motion.
- A weaning process from the custom splint will be begin at 6-8 weeks post-operatively.
- Transition to activities as tolerated

WEEKS 8-12:

- Follow up at week twelve for reevaluation or as needed if there are no concerns.
- Complete discontinuation of custom splint at week 8 is likely.
- Progressive strengthening in therapy, with discharge from hand therapy to be determined.
- Perform all activities as tolerated.