



Metacarpal or Phalanx (ORIF) Open Reduction and Internal Fixation 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) around 7 days following 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.
- The goals for hand therapy following a metacarpal or phalanx open reduction and internal fixation (ORIF) is to regain full range of motion, decrease pain, progress to strengthening activities and return to functional activities.

WEEKS 0-1:

- Remain in post-operative hand splint.
- Perform gentle range of motion activities of the fingers.
- 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 hand-based splint. The therapist will guide you in a therapeutic exercise program. This will include range of motion exercises, modalities as needed (ultrasound, hot pack, paraffin) and instruction in a home program.

WEEKS 1-2:

- Discontinuation of narcotics is expected, continue with Tylenol and ibuprofen as needed.
- Continue with OT, emphasizing increased AROM, including a progression to forearm rotation, swelling management, and the use of modalities as needed.
- Custom splint should be worn with activities, but may be removed for bathing and to perform home exercise program.
- Return to clinic at the end of week two for evaluation and suture removal.
- You may get your surgical area wet after sutures are removed, but it is best to avoid submerging your incision for 1-2 days.

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 reevaluation and repeat imaging.
- 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 weeks seven and eight post-operatively, removing when inactive or at home.
- 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 weeks eight or nine is likely.
- Progressive strengthening in therapy, with discharge from hand therapy to be determined.
- Perform all activities as tolerated.