

FLEXOR TENOLYSIS PROTOCOL

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Important instructions following surgery:

- After surgery, the wrist and hand will be in a light dressing. Please DO NOT remove this for the first 1-2 days. Try to keep the bandage clean and dry.
- To minimize swelling, keep the hand elevated to shoulder level.
- When sitting or lying, you should use a pillow to support you surgically affected extremity.
- To avoid stiffness and finger swelling, do gentle range of motion with the fingers. A pulling sensation may be noted, this is normal after surgery.

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. No antibiotic or general ointments for 2 weeks. No immersion in water. Avoid heavy soaking in pools, hot tubs, dishwasher for 2 weeks.
- 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.