

• Frisbie Memorial Hospital

Marsh Brook Rehabilitation Services

• Wentworth-Douglass Hospital

Fax: 603-749-9270

CLINICAL PROTOCOL FOR CARPAL TUNNEL SYNDROME (CONSERVATIVE and POST-OPERATIVE)

FREQUENCY: Up to 2 times per week or 1 time every other week for rechecks.

DURATION: Average estimate of formal treatment 1-2 times per week as needed or 1 time every other

week for recheck based on Occupational Therapy evaluation findings.

DOCUMENTATION: Progress Note to physician at each follow-up appointment. Follow treatment

calendar for daily requirements. Discharge Summary within 2 weeks of discharge.

TREATMENT (CONSERVATIVE/NON-SURGICAL)

VISIT ONE:

- 1) Standard evaluation.
 - Look For: Positive Phalen's and positive Tinel's.
- 2) Evaluation of work habits and avocational activities.
- 3) Fabrication of wrist splint in neutral with instruction to wear at night.
- 4) Issue and review educational materials regarding postures and work habits to avoid and proper hand use.
- 5) Home exercise program with stretches and tendon glides as well as use of ice.

VISIT TWO (7-10 DAYS AFTER VISIT ONE):

- 1) Re-evaluation of signs and symptoms for improvement.
- 2) Have patient demonstrate home exercise program to ensure independence.
- 3) Have patient state how he/she has changed his/her work and/or lifestyle habits to improve hand use.
- 4) Discharge unless a work site evaluation is appropriate and scheduled.

TREATMENT (POST-SURGICAL)

DURATION: 2-6 visits.

VISIT ONE:

- 1) Evaluation excluding strength testing.
- 2) Instruction in scar massage and scar management.
- 3) Home exercise program with active range of motion and tendon glides.
- 4) Educate patient in proper hand use at home and work. Patient given handouts on ergonomically correct postures for home and work.

VISITS 2-6: (1-2 times per week as appropriate for patient)

- 1) Discharge when patient meets discharge criteria, even if visit two.
- 2) Scar massage.
- 3) Review home exercise program and have patient demonstrate exercises.
- 4) Issue theraputty and instruct patient in exercises.
- 5) Continued therapy based upon the need to manage scar or ensure follow through of home exercise program for successful outcome.

NOTE: Grip can be measured with a dynamometer one month after surgery.

DISCHARGE CRITERIA:

- 1) Patient is independent with home exercise program.
- 2) Patient understands how to modify work and home environment to promote proper hand use.
- 3) Patient can competently demonstrate scar management techniques.
- 4) Patient is non-compliant or encounters complications which necessitate a referral to the surgeon.

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