



Frisbie Memorial Hospital

Marsh Brook Rehabilitation Services

Wentworth-Douglass Hospital

CLINICAL PROTOCOL FOR POST-OP DUPUYTREN'S

FREQUENCY: One to three times per week.

DURATION: Average estimate of formal treatment 1-3 times per week up to 12 visits over 4 weeks 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.

INITIAL EVALUATION (VISIT ONE) -- 24-48 HOURS POST-OP

GOALS:

1. Standard Evaluation
 - Edema
 - Wound assessment
 - AROM
2. Fabricate finger palm splint with digit(s) in full extension.
3. Instruct in elevation for edema control.
4. Instruct in home program of hook, full fist, straight fist with emphasis on extension.
5. If appropriate (McCash), begin wpl.
6. Patient education regarding infection and activities to avoid.

If patient presents with the following **Self-Management Criteria:**

- Minimal to no limitation of active range of motion of digits;
- Minimal to no edema in hand;
- Closed or open procedure with no approval for wpl and clean-looking wound;

then patient can be placed on a home exercise program in conjunction with a splint wearing schedule. Patient to be evaluated regarding activities to avoid. Follow-up appointment to be made every 1-2 weeks until Discharge Criteria has been met. If patient does not meet above criteria, then a course of formal rehabilitation will be initiated 2-3 times per week until below Discharge Criteria has been met.

DISCHARGE CRITERIA:

- Digit active range of motion within normal limits or those expected by physician.
- Able to perform functional activities.
- Independent with home exercise program.
- Patient has adequate knowledge of diagnosis and demonstrates the ability to self-manage symptoms.
- Failure to progress.
- Failure to comply.

Rehab 3: One High Standard, Three Local Partners

For more information go to www.rehab-3.com

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--TREATMENT GUIDELINES--

ONE WEEK POST-OP

- GOALS:**
1. Patient will demonstrate proper home exercise program techniques.
 2. Increased active digit flexion, extension, and abduction.
 3. Patient will be independent with wound dressing techniques.
 4. Promote wound healing.

- Exercises in home exercise program done every hour.
- Blocking exercises.
- If edema, coban or isotoner glove.
- Patient education regarding anatomy and biomechanics.
- Whirlpool.

TWO WEEKS POST-OP

- GOALS:**
1. Full active digit flexion, extension, abduction (within physician's expectations)
 2. Decreased edema to minimal.
 3. Promote wound healing if open procedure.
 4. Increase scar mobility (if not open procedure – McCash).

- Gentle active assisted range of motion for both flexion and extension.
- Fluidotherapy or paraffin if wound closed and range of motion limited.
- Retrograde/Milking massage for edema.
- Desensitization.
- Otoform/Elastomer pad for scar softening.
- Scar massage.
- Extension splinting at night.
- Whirlpool continued.

2 ½ to 4 WEEKS POST-OP

- GOALS:**
1. Increase hand strength, if wound is closed, to tolerate light resistive hand tasks.
 2. Closure of wound if open procedure.
 3. Patient will be independent with comprehensive home exercise program.
 4. Full active digit flexion, extension, and abduction.
 5. Scar will be soft and mobile.

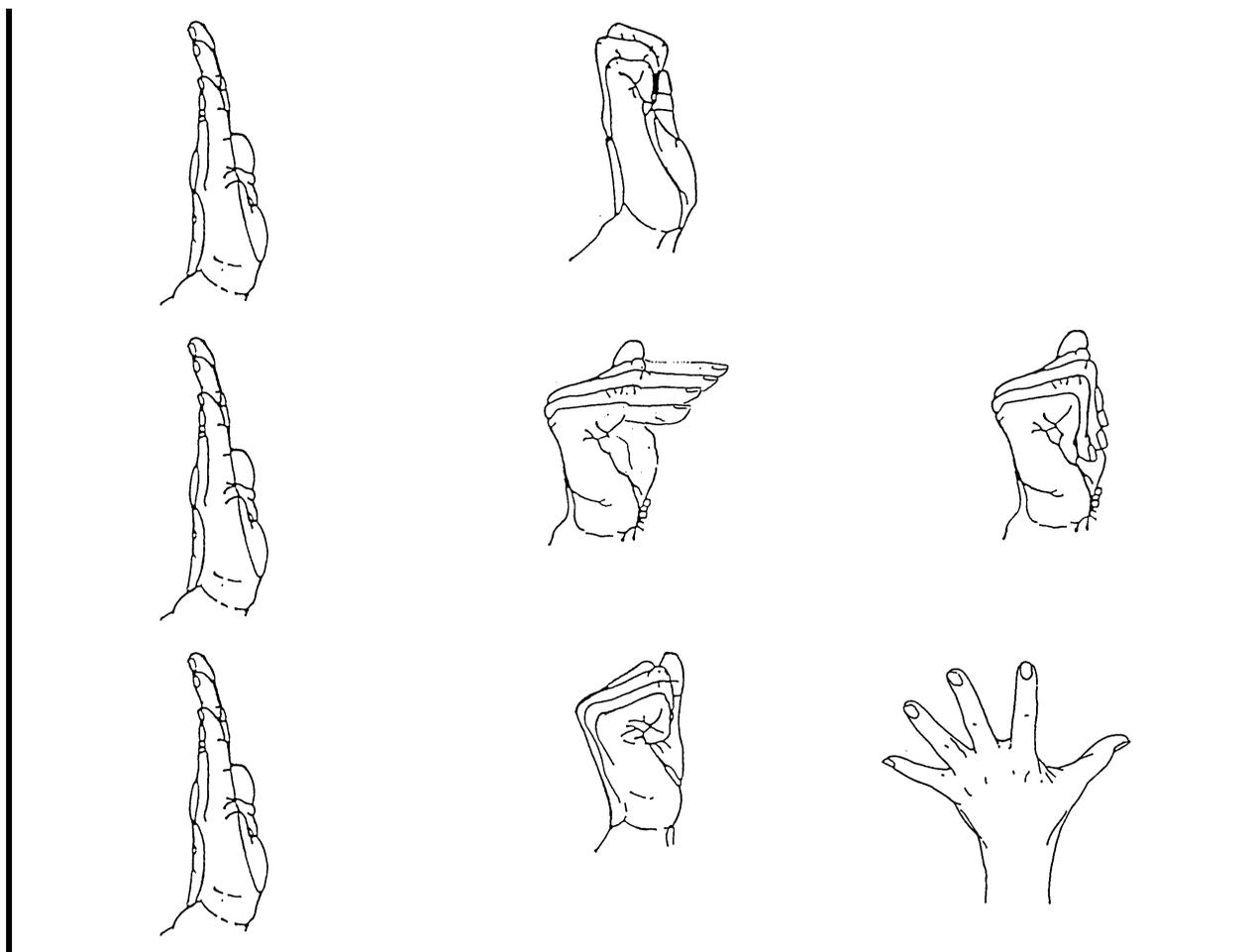
- Putty squeeze, pinch exercises (if wound closed).
- Continue with treatment under Week 2.
- Discharge splint for light ADL's; may be worn exclusively at night at Week 4 providing range of motion remains good.
- Dynamic/Static progressive splinting if needed.
- Discharge patient to home exercise program and night splinting.

UP TO 6 MONTHS POST-OP (through independent home exercise program)

- GOALS:**
1. Maintain range of motion.
 2. Maintain scar mobility.

- Continue night splinting.
- Continue range of motion exercises and extension finger drags.
- Continue scar massage.

DUPUYTREN'S EXERCISES



1. Fists: Do each of the above fists X 10 repetitions.
2. Finger Drags: Place hand flat on table and drag hand toward body so finger(s) straighten X 10 repetitions.
3. Scar Massage: Circular massage to scar, using lotion, X 5 minutes.
4. Splint: Wear as instructed.