



Frisbie Memorial Hospital

Marsh Brook Rehabilitation Services

Wentworth-Douglass Hospital

CLINICAL PROTOCOL FOR UCL CONSERVATIVE MANAGEMENT OF GRADE III INJURIES, NON-SURGICAL APPROACH

FREQUENCY: 2 times first week of treatment; at 6-8 weeks, 2-3 times per week.

DURATION: Average estimate of formal treatment 1-2 times per week up to 5 visits (dependent upon splint adjustment needs) over 12 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.

VISIT ONE:

GOALS:

- 1) Splint fabrication – long thumb spica splint with IP free or short thumb spica splint (per physician request).
- 2) Educate patient regarding precautions and full-time splint wear.

If patient presents with the following Self-Management Criteria:

- Minimal edema
- Minimal to no pain at rest
- Apparent adherence to precautions

then patient can be placed on a home exercise program (digit range of motion excluding thumb) with a recheck at 10 days to adjust splint if needed. Follow-up post-physician appointment at 6-8 weeks post-injury to begin active range of motion at MP joint upon physician approval.

DISCHARGE CRITERIA:

- 1) Able to perform light functional activities.
- 2) Failure to comply.
- 3) Independent with splint wear.
- 4) Independent with home exercise program.

-TREATMENT GUIDELINES-

VISITS TWO-PLUS (7-10 DAYS POST-INJURY or POST-SPLINT FABRICATION):

- Adjust splint for more snug fit secondary to decreasing edema.
- Further adjustments prn.

WEEKS 6-8:

- Home exercise program – initiation of active range of motion at MP joint and light grip strengthening (no pinch strengthening or opposed pinch strengthening).
- Measurement of active thumb range of motion at MP and IP.
- Patient may come out of splint for light functional activities without forceful opposed pinch.

WEEK 12:

- Grip and pinch strength assessed.
- Discontinue splint.
- Final evaluation and more aggressive functional tasks.
- Pinch strengthening.

JL/aoc Approved: 4/20/01, Rev. 2009