



# HAND & UPPER LIMB CLINIC

## Flexor Tendon Rehabilitation Protocol; Zone II/III

### Purpose of Early Active Motion

- Minimizes adhesions
- Increases strength of tendon healing during early stages
- Minimizes the work of flexion, thereby reducing gapping

### Manchester Short Splint

- Permits wrist motion which facilitates IP joint extension and flexion
- Encourages flexion from DIP joint with MCP flexed at 30 degrees
- Allows synergistic function

### Keys

- Passive motion before active
- Edema control is necessary
- Scratch exercises (using fingers to guide)
- DO NOT PLACE and HOLD (causes snapping tendon)
- Use relative motion splint to correct PIP joint lag
- Safe use of hand with splint in situ

### Time Frames

- Dorsal block with wrist in extension (30-45 degrees)
- MCP's at 30-45 degrees
- Early active at **day 4-5**
- 1/3 to 1/2 half-flex to start (not full)
- Do exercises hourly to 10 reps
- **At week 2:** Remove dorsal wrist component to short splint (with extension block)
- **At week 4-6:** Full active flexion
- **At week 5:** Remove splint for Activities of Daily Living
- **At week 12:** Full strength and unrestricted use