

Extensor Tendon Zone III/Zone IV Repair

Dr. Staiger

*Schedule OT same day as doctor.

Time Frame	Treatment	Goals
Phase I Post-Op Day 10-14	<ul style="list-style-type: none"> • Evaluate and Treat. • Fabricate a custom finger-based PIP joint extension gutter orthosis (L3933) (DIP joint free but may be included if appropriate/needed). <ul style="list-style-type: none"> ○ Wear orthosis continuously. (Remove only to change dressing/stockinette sleeve) keeping PIP straight. • Instruct in edema management techniques. • Instruct in scar management techniques (to begin once incision is healed). • Issue scar pad (to be worn once incision is healed). 	<ul style="list-style-type: none"> • Protection • Edema control • Scar management • Pain management • ROM of involved finger MP and DIP as well as with all joints of uninvolved fingers
Phase II 3 Weeks	<ul style="list-style-type: none"> • May use modalities as indicated (ultrasound typically not done until 4 weeks post-op). May include Ketoprofen, Dexamethasone, or Potassium Iodide as indicated at 4 weeks. 	<ul style="list-style-type: none"> • Continued edema, scar, and pain management
Phase III 4 Weeks	<ul style="list-style-type: none"> • Adjust orthosis as needed secondary to changes in swelling. • Continue wearing digital gutter protection orthosis between exercise sessions during the day and full time at night. • Instruct in gentle, pain-free active range of motion exercises to the PIP and DIP joints including IP joint blocking, composite flex, and IP extension with MPs blocked in flexion to be completed 6-8 times a day. • May use ultrasound: <ul style="list-style-type: none"> ○ Modalities may include Ketoprofen, Dexamethasone, or Potassium Iodide as indicate. 	<ul style="list-style-type: none"> • Continued proper orthosis fit • ROM of entire involved finger
Phase IV 6 Weeks	<ul style="list-style-type: none"> • Continue wearing orthosis at night. • Instruct in passive range of motion provided extensor lag is 10° or less. • At 7 weeks post-op, if needed, therapist can try prefabricated buddy straps (A9270 x2) or taping to assist with range of motion or a custom hand-based dynamic flexion orthosis (L3921). 	<ul style="list-style-type: none"> • Functional ROM of involved finger
Phase V 8 Weeks	<ul style="list-style-type: none"> • Discontinuation of orthosis to be determined by the physician. • If extensor lag is present, continue static orthosis. • Begin gentle strengthening. 	<ul style="list-style-type: none"> • PREs