



FPL Tendon Repair

(Standard)

Dr. Staiger

*Schedule OT 3-5 days post-op.

Time Frame	Treatment	Goals
Phase I Post-Op Day 3-5	 Evaluate and Treat. Dressing change and check for signs/symptoms of infection. Fabricate a custom forearm-based dorsal blocking orthosis (L3808) with wrist neutral, MP 15°, IP 30° flexion. Wear at all times. Instruct the client on importance of no use of hand at this time. 	 Protection Edema control Incision healing Pain management PROM
	 Instruct in edema control. Instruct in MP, IP, and composite passive flexion/extension within dorsal blocking orthosis 5-10X every waking hour. See 1-2 times a week. Same day as M.D. appointment. 	Scar management
Day 10-14	 Same day as M.D. appointment. Instruct in scar management techniques (to begin once incision is healed). Issue scar pad (to be worn once incision is healed). 	Scar management
Phase III 3 Weeks	 May use modalities as indicated (ultrasound typically not done until 6 weeks post-op). Modalities may include Ketoprofen, Dexamethasone, or Potassium Iodide as indicated at 6 weeks. 	 Continued edema control and pain and scar management
Phase IV 4 Weeks	 Begin thumb gentle AROM/AAROM. Begin active wrist extension exercises. Continue passive flexion and scar massage. 	• ROM

Phase V 5-6 Weeks	 Begin composite wrist and finger extension active range of motion. Begin isolated blocking exercises of IP and MP joints into flexion/extension. Continue active/passive thumb flexion exercises. Continue active thumb extension exercises. Dorsal blocking orthosis is usually discontinued at 6 weeks post-op, depending on doctor's orders. 	• Functional ROM
Phase VI 7 Weeks	 If stiffness remains, begin passive extension of wrist/thumb. 	 Continued progression towards functional ROM
Phase VII 8 Weeks	Begin gentle grip strengthening.	PREs
12 Weeks	* Usually client may return to normal activities without restrictions	