



MCP Pyrocarbon Total Joint

(Osteoarthritis and Trauma)

Dr. Widstrom

*Schedule OT same day as doctor.

Time Frame	Treatment	Goals
Post-Op Same day as MD	 Evaluate and Treat. Dressing change and check for signs/symptoms of infection. 	 Protection Edema control Incision healing
	 Fabricate a dynamic orthosis for day use and static orthosis for night. Instruct in orthosis wear and care. Instruct in edema management techniques. Instruct in exercises within the day orthosis: MCP Flexion to 45° to 60° according to doctor's instruction, Opposition to each fingertip, Full PIP/DIP flexion and extension. 	 Pain management Limit ROM
Phase I Day 10-14	 Instruct in scar management techniques (to begin once incision is healed). Issue scar pad (to be worn once incision is healed). 	 Scar management
Phase II 3 Weeks	 May use modalities as indicated (ultrasound typically not done until 4 weeks post-op) Modalities may include Ketoprofen, Dexamethasone, or Potassium Iodide as indicated at 4 weeks. If used, ultrasound is usually completed at a low intensity (i.e. 0.5 w/cm2, 3 MHz) and pulsed (i.e. 20%) setting when over the implant area. 	 Continued edema control, pain and scar management, and ROM
Phase III 4 Weeks	 Continue with orthosis wearing and exercises. Resume light ADL outside of orthosis. Increase allowed MP flexion to 90°. If 60° of flexion has not been achieved, assisted ROM exercises and a dynamic MCP flexion assisted orthosis may be required. 	• Functional ROM
Phase IV 6 Weeks	 Progress to full activities as tolerated. 	Return to function