



Swanson Finger PIP Joint Implant

Dr. Staiger

*Schedule OT same day as doctor.

**At all times, monitor client's extension making sure to always maintain full extension.

**If an extensor lag develops or is noted at the DIP joint, fabricate an extension orthosis for the DIP joint to be worn up to 6 weeks while doing exercises.

Time Frame	Treatment	Goals
Phase I Post-Op Day 10-14	 Evaluate and Treat. Instruct in edema management techniques. Fabricate a digital gutter orthosis keeping PIP joint in full extension and including the DIP joint. Wear this for at least 6 weeks post operatively between exercises sessions and for three months at night. Fabricate an exercise orthosis blocking PIP at max of: 70 degrees for ring and small fingers, 60 degrees for middle finger, 45 degrees for index finger. Hourly exercises for gentle flexion and extension of the finger should be completed in the exercise orthosis. Instruct in scar management techniques (to begin once incision is healed). **If there is an extension lag to begin with, begin the exercise orthosis at 40°. Progress the exercise orthosis 10° each week until the max is reached. Make sure extension is not being 	Protection Edema control Incision healing Pain management Scar management Limit ROM
Phase II 3 Weeks	 compromised with the orthosis progression. 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. Static extension orthosis is discontinued during the day at 4 weeks post-op. Still worn at night for another 3 weeks. 	Continue edema control and pain and scar management
Phase III 6 Weeks	Resistive flexion exercises are started.	• PREs