



TFCC Repair (Peripheral Tear)

Dr. Staiger

*Schedule OT 6 weeks post-op, same day as 6 week doctor appointment.

Time Frame	Treatment	Goals
Phase I	Evaluate and Treat.	 Protection
Post-Op	 Instruct in edema management techniques as needed. 	 Edema control
6 Weeks	 Custom fit with Zipper wrist cock-up orthosis, wrist in 	Pain management
	neutral for between exercises.	Scar management
	 Fit with soft DRUJ wrap (i.e. Carpal Guard, Wrist Widget, 	• ROM
	or Squeeze Ulnar Compression Wrap) for exercises and	
	then once client is to wean out of the Zipper orthosis.	
	 Begin gentle elbow, forearm, wrist, and hand active range of motion. 	
	 Instruct in scar management techniques (to begin once incision is healed). 	
	 Issue scar pad (to be worn once incision is healed). 	
	Progress with active assistive range of motion as	
	tolerated.	
	May use modalities as indicated (ultrasound typically not dans until 4 works past an)	
	done until 4 weeks post-op) O Modalities may include Ketoprofen,	
	 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 plate area (if	
	completed with ulnar shortening osteotomy).	
	Attend occupation therapy 1-3x/week for range of	
	motion, edema control, and scar management.	
Phase II	Continue with above exercises.	Functional ROM
8 Weeks	Begin passive range of motion as tolerated.	
	Dynamic splinting may be completed as needed.	
Phase III	Begin progressive strengthening exercises.	• PREs
10-12 Weeks		