

Trigger Finger (Conservative)

Dr. Widstrom

❖ Schedule OT same day as MD 10-14 days post-op

Time Frame	Treatment	Goals
Initial visit	<ul style="list-style-type: none"> • Evaluate and Treat • Assess level of pain. • Instruct in edema management techniques • Instruct in isolated flexion/extension of PIP and DIP joints. • Instruct in passive flexion/active extension of digits • Instruct in place and hold exercises • Avoid composite fist • Immobilization splinting may further keep down pain and swelling <ul style="list-style-type: none"> ○ If ordered by MD fabricate a hand-based MP extension splint; he may issue an oval 8 PIP joint extension splint for the involved digit but prefers hand based MP extension • May use modalities as indicated <ul style="list-style-type: none"> ○ Modalities may include Ketoprofen, Dexamethasone, or Potassium Iodide as indicated • Continue OT 2x/week for modalities to minimize localized swelling along the A1 pulley 	<ul style="list-style-type: none"> • Edema management • HEP • ROM • orthosis wear and care
Phase I: 4-6 weeks	<ul style="list-style-type: none"> • follow up with physician if patient continues to experience symptoms • If trigger finger symptoms continue to improve wean into home exercises program. 	<ul style="list-style-type: none"> • HEP • f/u with MD in necessary