

**Volar Plate Injury/Rupture
(Conservative)
Dr. Staiger**

Time Frame	Treatment	Goals
Phase I Initial Visit 1-3 Days Post Reduction	<ul style="list-style-type: none"> • Evaluate and Treat • Assess level of pain. • Instruct in edema management techniques including icing and Coban wrapping. • Fabricate digital dorsal blocking orthosis, position digit in 35° PIP joint flexion, aka 35° extension lag, and DIP joint in neutral. • Instruct in active and gentle passive flexion exercises followed by active extension. Exercises should be completed within the constraints of the digital dorsal blocking orthosis. • May use modalities as indicated. <ul style="list-style-type: none"> ○ Modalities may include Ketoprofen, Dexamethasone, or Potassium Iodide as indicated. 	<ul style="list-style-type: none"> • Pain management • Edema control • Protection • Limited ROM
Phase II 3-6 Weeks Post Reduction	<ul style="list-style-type: none"> • Remold dorsal blocking orthosis, each week. Increase PIP joint extension 10° each week until full extension. • Continue active/passive flexion and active extension exercises within the constraints of the digital dorsal blocking orthosis. • May complete dynamic flexion taping if flexion is limited. 	<ul style="list-style-type: none"> • Increase allow ROM but still limited
Phase III 6 Weeks Post Reduction	<ul style="list-style-type: none"> • Discontinue digital dorsal blocking orthosis if ordered by the physician. • Begin unrestricted active/passive range of motion exercises. 	<ul style="list-style-type: none"> • Functional ROM
Phase IV 7 Weeks Post Reduction	<ul style="list-style-type: none"> • Begin static progressive or dynamic splinting if digital extension is limited. 	<ul style="list-style-type: none"> • Continued production towards functional ROM