

## Extensor Tendon Zone V Repair

**Dr. Staiger**

\*Schedule OT same day as doctor.

Time Frame	Treatment	Goals
Phase I Post-Op Day 10-14	<ul style="list-style-type: none"> <li>• Evaluate and Treat.</li> <li>• <u>Fabricate protection orthosis:</u> <ul style="list-style-type: none"> <li>○ If laceration to EDC to the index finger then fabricate MCP boost orthosis positioning index finger in full MCP joint extension protection orthosis should include middle and ring finger. IP joints are left free.</li> <li>○ If laceration to EDC to middle finger. Fabricate a MP joint boost orthosis positioning middle finger in full MP extension. Protection orthosis should include index and ring fingers. IP joints are left free.</li> <li>○ If laceration to EDC to ring finger. Fabricate a MP joint boost orthosis position ring finger in full extension. Protection orthosis should include middle and small fingers. IP joints are left free.</li> <li>○ If laceration to small finger. Fabricate a MP joint boost orthosis positioning small finger in full extension. Protections orthosis should include ring and middle finger. IP joints are left free.</li> </ul> </li> <li>• Instruct in scar management techniques (to begin once incision is healed).</li> <li>• Issue scar pad (to be worn once incision is healed).</li> <li>• Instruct in edema management techniques.</li> </ul>	<ul style="list-style-type: none"> <li>• Protection</li> <li>• Edema control</li> <li>• Scar management</li> <li>• Pain management</li> </ul>
Phase II 4.5 Weeks	<ul style="list-style-type: none"> <li>• Instruct in active range of motion exercises including: active wrist flexion/extension, tendon gliding exercises, isolated EDC (can use Velcro trappers to assist MP joint flexion/extension), isolated PIP/DIP joint flexion/extension.</li> <li>• Continue protection splinting between exercise sessions during the day and at night.</li> </ul>	<ul style="list-style-type: none"> <li>• ROM</li> </ul>
Phase III 5 Weeks	<ul style="list-style-type: none"> <li>• May use modalities as indicated <ul style="list-style-type: none"> <li>○ Modalities may include Ketoprofen, Dexamethasone, or Potassium Iodide as indicated.</li> </ul> </li> <li>• Continue above exercises, scar management, and splinting.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue improving ROM, edema control, and pain and scar management</li> </ul>

Phase IV 6 Weeks	<ul style="list-style-type: none"> <li>• Instruct in passive range of motion for fingers and wrist to be determined by the physician.</li> <li>• Concentrate on reducing extensor tightness and monitor for extension lag.</li> </ul>	<ul style="list-style-type: none"> <li>• Working towards functional ROM</li> </ul>
Phase V 7-8 Weeks	<ul style="list-style-type: none"> <li>• Instruct in gentle strengthening exercises as determined by the physician.</li> <li>• Discontinue protection orthosis to be determined by the physician.</li> </ul>	<ul style="list-style-type: none"> <li>• PRES</li> </ul>