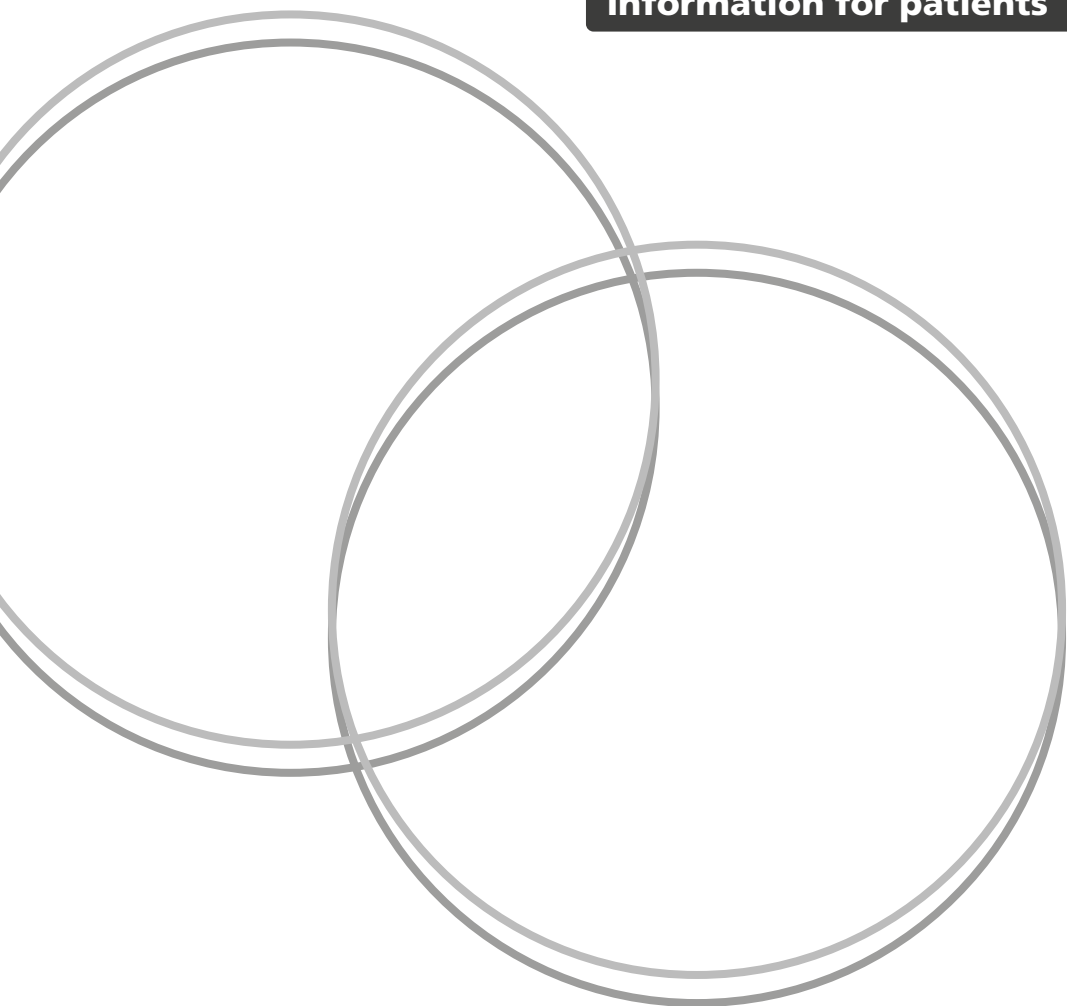


Flexor Tendon Repair – Manchester Short Regime

Information for patients



Your injury and surgery

You have had an injury to one or more tendons in the palm of your hand that bend your finger(s). You may have also injured other structures in the area. Your hand therapist will discuss your individual injury with you. The injured tendon(s) has been repaired in surgery. The two ends of the tendon have been stitched back together, enabling you to start moving your fingers under the guidance of hand therapy.

You have undergone surgery to repair the tendons that bend your finger. It will take around 12 weeks for your tendons to be strong enough to return to normal function.

Splint

- The tendon repair is very delicate and can easily be damaged. To protect the repair, you will be provided with a splint.
- You should wear the splint 24 hours a day for the first five to six weeks.
- You should also avoid hanging/carrying anything from the splint/arm. If your splint becomes uncomfortable speak to your therapist who can remould or alter your splint.
- The splint is made out of thermoplastic material which softens when hot. So do not expose it to any form of heat.

Wound

- Keep your dressing dry and clean at all times. If the dressing gets wet or if you are concerned about your wound, contact the Hand Therapy Unit on the number on your appointment card.
- Once your stitches are removed and your wound is fully healed you should start massaging the scar with a non perfumed moisturiser such as E45 or Aqueous cream. This is an important part of your treatment as it will help prevent the scar tissue sticking to the tendon and limiting movement of the finger.

Keep your wound clean and dry until it heals. You should monitor your wound for signs of infection. These include:

- oozing of yellow or green fluid/pus from the wound
- severe pain at the wound site
- increased redness or heat at the wound
- feeling generally unwell or feverish

If you experience any of these symptoms, you should seek **urgent medical attention**.

Driving

You should not drive with your splint on or remove your splint to do so. Driving with or without your splint puts you at significant risk of rupturing your tendon(s). To drive with your splint on also puts yourself, any passengers and other motorists at risk as you will not have adequate control of the vehicle.

You should not drive until at least 8 weeks after your tendon repair.

Swelling

To minimise swelling keep your hand raised as much as possible, with support if needed.

Protecting your tendon

Do NOT:

- Use the injured finger for anything other than the exercises you have been given.
- Try and straighten your finger using your other hand or with any force.
- Remove your splint unless you are instructed to do so by the therapist.
- Drive your car or ride a bike until instructed by your therapist
- Hang your hand down by your side for a prolonged period as this may cause it to swell.

Exercises

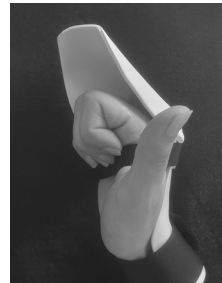
Gentle movement of the tendon helps to limit scar tissue sticking to the tendon and will help to gently strengthen the tendon. You should complete only the exercises advised and at the frequency advised by your therapist. Doing too many exercises may cause inflammation and the formation of extra scar tissue and may lead to the repair not being as strong. Doing too few may lead to stiffness and excessive scar tissue.

The following exercises should be completed hourly for the first 5 weeks.

1. Using your unaffected hand bend your injured finger(s) down as far as possible. Repeat this exercise until the finger(s) bend easily. You may push the fingertip to touch the palm without harming the repair. Repeat this exercise for the other fingers.



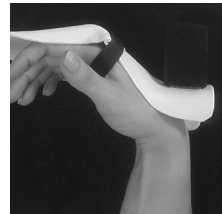
2. Slowly bend all fingers into a fist using 50% of your maximal effort.



3. Bend the finger fully forwards at the knuckle, then slowly straighten the tip of your finger up to touch the lollipop stick as shown.



4. With wrist strap released, slowly bend the wrist forwards and then back to the start position.



5 – 6 weeks

At 5 weeks your therapist will advise you on slowly weaning out of the splint. You will normally be instructed to continue wearing the splint at night or in vulnerable situations up until 6 weeks.

By 6 weeks your tendon repair has gained sufficient strength to discard all splinting. **The repaired tendon however takes 12 weeks to be strong enough to return to full function.** You will therefore still need to follow some precautions. Your therapist at this stage may make you a different splint that will help you regain movement.

You are now allowed to move your fingers and wrist actively through their full range of movement. **However, you should not try and stretch the fingers and wrist fully back until 8 weeks after the surgery.** Your therapist will advise you on any additional exercises you may need to start doing,

Scar

You should continue to massage your scar and apply any silicone gel or elastomer already provided, as the scar tissue remains active.

Function and return to work

You can begin to use your hand for light, functional tasks for example fastening buttons or lifting a full cup. At 8 weeks you can increase the use of your hand and resume driving. You should however avoid lifting anything very heavy or gripping very tightly until 12 weeks when the tendon is strong enough to withstand this.

Time off work will depend on the activities that you are required to do. Please discuss specific activities with your therapist as every injury and person is individual.

General examples:

- Driving – after 8 weeks
- Manual work including carpentry – after 12 weeks
- Heavy lifting – after 12 weeks
- Contact sports – after 12 weeks

How to contact us

If you have any questions or concerns, please contact the **Oxford Hand Therapy Unit:**

John Radcliffe Hospital

West Wing, LG1, Plastics and ENT
Headley Way
Headington
Oxford
OX3 9DU

Tel: **01865 231181**

(8.00am to 4.30pm, Monday to Friday)

Nuffield Orthopaedics Centre

Physiotherapy Department
Windmill Road
Headington
Oxford, OX3 7LD

Tel: **01865 738074**

(9.00am to 4.30pm, Monday to Friday)

Email: **oxfordhandtherapyunit@ouh.nhs.uk**

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

This leaflet has been produced with the permission of the Hand Therapy Department, University Hospitals Coventry & Warwickshire NHS Foundation Trust, who provided the original content.

Author: Kelvin Tse and James Williams
March 2026
Review: March 2029
Oxford University Hospitals NHS Foundation Trust
www.ouh.nhs.uk/information



Making a difference across our hospitals

charity@ouh.nhs.uk | 01865 743 444 | hospitalcharity.co.uk

OXFORD HOSPITALS CHARITY (REGISTERED CHARITY NUMBER 1175809)

