

Hand & Plastics Physiotherapy Department

# Flexor Tendon Repair

Information for patients



## Introduction

You have had surgery to repair one or more of the tendons in your hand / arm. You have been referred to the Hand Therapy Department for your ongoing care and treatment. This booklet gives you important information about your rehabilitation programme.

## Important instructions after surgery

- After surgery your forearm and hand will be in a large bandage with a plaster-of-Paris splint. **DO NOT REMOVE THIS!** Try to keep your bandage clean and dry.
- **DO NOT** use your hand at all. You may have a small amount of room for movement within the dressing.
- To **minimise swelling** you must keep your hand lifted up to your shoulder level. Keep your hand above your heart at all times during the first few weeks.
- When sitting or lying you should use pillows to support it, especially when you are asleep.
- When you are out and about use your arm muscles to hold your arm across your chest to the opposite shoulder.

## Time off work

Depending on your job we would advise:

| Type of Work / Activity | Approximate time off |
|-------------------------|----------------------|
| Office based            | 6-8 weeks            |
| Driving                 | 8 weeks              |
| Manual work             | 10-12 weeks          |
| Sport                   | 12 weeks             |

If you need a 'fit note' or sick note, please visit your GP.

## Referral to Hand Therapy

You will be telephoned with an appointment for Hand Therapy. The appointment will be within 3-5 days of the operation. If you have not heard anything 5 days after your operation, please contact the Hand Therapy Department on (01865) 231181.

The appointment will be on Level LG1 in the West Wing – follow signs to 'Plastics Outpatients'.

## What to expect in Hand Therapy

The first appointment will last approximately 1 hour. The physiotherapist will remove the dressings then check, clean and re-dress your wound.

A lighter plastic splint will be made to fit you and your physiotherapist will teach you very specific exercises to perform in the splint (see pages 4-6).

**Splint Care** (once you have been made a plastic splint)

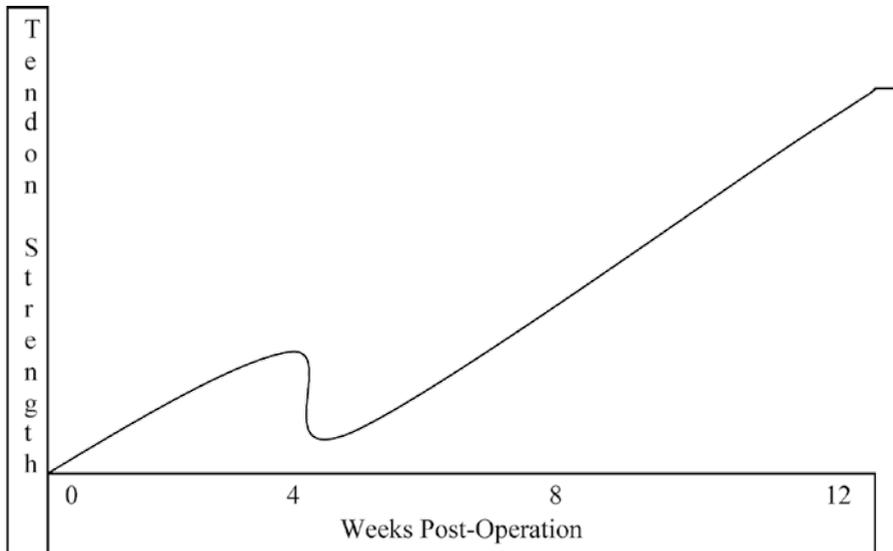
- Do not place the splint in hot water or near a heater.
- Check your skin regularly for red, sore areas of skin using the safe technique shown to you by your therapist. Contact your therapist if you notice any red, sore areas of skin.
- Use a plastic bag over the whole arm when in the bath or shower (DO NOT take the splint off to bathe).

### **Scar Massage**

You can start this when your stitches have been removed and the wound looks dry.

- Use a simple moisturiser, e.g. Aqueous cream or E45, over your scar.
- Rub over your scar to encourage the skin to move normally.
- You can also do some massage without moisturiser.
- Perform this 3-4 times a day for 3-5 minutes.

**Figure to demonstrate healing time of tendons correlating to Stage of rehab**



# Flexor Tendons Rehab Programme

You will be guided through each stage by your physiotherapist. Do not move onto the next stage without instruction to do so.

## **Stage 1 (Commence 3-5 days post-op)**

Early active movement exercises:

Perform 3 repetitions of the following exercises every 2 hours:

1. Use your good hand to curl each finger of your operated hand down to the top of your palm.



2. Repeat exercise as above but try to keep your finger in the flexed position using your muscles as you let go with your other hand.



3. Repeat the flexion movement as above entirely using the muscles of your repaired hand.

Try to return your fingernails to touch the splint.



These exercises help to prevent your tendons becoming stuck in your scar tissue and ensure that once healed you will have the best possible function and outcome.

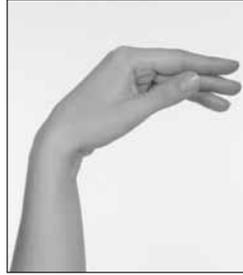
## Stage 2 (4 weeks)

### 1. Progressing towards Full Active Movement

Sit in a safe environment and remove your splint. Rest your elbow on a table and let your fingers relax.

- a) Allow your wrist to flex forwards

*Note how the fingers relax into a straighter position, check yours do too.*



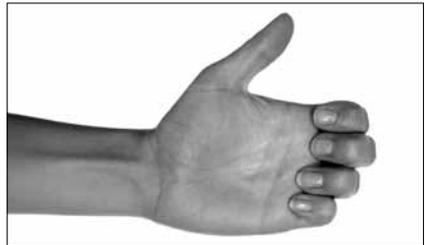
- b) Then, keeping your fingers floppy, extend your wrist back.

*Again check that your fingers are relaxing into a curled position.*



### 2. Hook Grip

Keeping the big knuckles on the back of your hand flat, bend your fingers to place your finger-tips at the top of your palm.



### 3. Flat Fist

Keeping your finger tips straight aim to bend your fingers to touch the bottom of your palm.



### 4. Hook into full fist

Perform the hook grip in exercise 2 and then roll your big knuckles down to make a full fist.



To



Repeat 5 times every 2 hours.

Put your splint back on after these exercises.

### Stage 3 (5-6 weeks)

You should now be able to make a full fist.

You may now start to wean yourself from the splint as advised by your physiotherapist. Use your hand for light activities such as washing, dressing and eating.

Make sure you wear your splint at night and outdoors.

| <b>Light activities</b>         | <b>Medium activities</b> | <b>Heavy activities</b>                 |
|---------------------------------|--------------------------|---|
| Using the telephone             | Painting and decorating  | Using a knife                           |
| Handling money                  | Ring-pull on can         | Ironing                                 |
| Zips                            | Using towels             | Hoovering                               |
| Light clothes                   | Using fork and spoon     | Lifting children                        |
| Personal care, washing, make-up | Putting on socks, tights | Lifting boxes, carrying shopping        |
| Dusting                         | Hanging washing out      | Making a bed                            |
| Writing, signing your name      | Washing up, wiping up    | Hand washing                            |
| Light switches                  | Sweeping                 | Gardening                               |
| Using remote control            | Reading books            | Driving, cleaning a car                 |
| Reading the newspaper           | Holding a glass          | Cooking, lifting a saucepan, kettle     |
|                                 | Using scissors           | Using a tin opener                      |
|                                 | Combing hair, shaving    | Sports: rugby, football, swimming, golf |
|                                 | Buttons                  |   |
|                                 | Unscrewing jar lids      |   |
|                                 | Holding a pint glass     |   |

### **Stage 4 (6-8 weeks)**

If you have managed all the previous stages, and have been told to do so by your physiotherapist, you may now discard your splint.

Start to increase the use of your hand to performing moderate activities eg. Opening doors, sweeping and washing-up.

(See table on page 8)

### **Stage 5 (8 weeks)**

You may return to driving at this stage if you are able to make a full fist and feel able to control the vehicle safely.

You should now gradually progress your activities, working on increasing your strength and function towards unrestricted activities at 12 weeks.

### **Stage 6**

It maybe that at this stage further hand therapy and / or splinting is required to regain full range of movement and/ or function.



## Directions to Hand Therapy Department

We are situated on Level LG1 of the West Wing at the John Radcliffe Hospital. Turn right out of the lifts and follow the blue signs to ENT & Plastics Outpatients.

**Any questions you have for your physiotherapist**

If you need an interpreter or need a document in another language, large print, Braille or audio version, please call **01865 221473** or email **PALSJR@ouh.nhs.uk**

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