

New short splint after flexor tendon repair

a guide for patients

Introduction

For the first five weeks the tendon repair is very delicate and can be easily undone. To protect the repair you will be provided with a splint. This splint stops you making a fist which could cause the tendon to re-rupture. You should wear the splint 24 hours a day. Do not use the hand to do any functional tasks as this could also cause the tendon to rupture. You should also avoid hanging or carrying anything from the splint/arm.

You should not drive with your splint on or remove your splint to do so. Driving either 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.

If your splint is 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. Please follow the instructions in this leaflet carefully. If you are unsure about anything please ask your therapist.

Wearing the splint

You will need to wear a splint (see above) for up to 6 weeks. *This splint must be worn at all times and you must keep the hand dry in the shower or bath by protecting it with a plastic bag secured at the wrist.* After the stitches have been removed, around 14 days after surgery, you will be allowed to remove the splint for careful washing of your hand. Your therapist will show you how to do this safely. When the wound is healed, you may also use hand cream to keep the skin soft.

Wound

Keep your dressing dry and clean at all times. If the dressing gets wet or if you are concerned about your wound contact our specialist hand nurse on 02476 965072. Once your stitches are removed and your wound is fully healed you should start massaging the scar with a water based moisturiser for example E45, Aqueous cream. This is an important part of your treatment, as it will help prevent the scar tissue sticking to the tendon. This could result in the limited movement of the thumb.

PATIENT INFORMATION LEAFLET

Swelling

Swelling can be a source of pain and stiffness. To minimise this keep your hand raised as much as possible. Your doctor may refer to this as elevation. Ice-packs can also be used to reduce swelling, but please wrap them in a water-proof cover to avoid soaking your dressings, and avoid direct contact your skin.

Protecting your tendon repair

- You must not use the injured finger for anything other than the exercises you've been given.
- You must not put any force or pressure against your injured finger.
- You may carefully use the uninjured fingers as instructed by your therapist.
- Do not wrap any tight dressings around your finger as this may cause your tendon to break again.
- Do the exercises every hour.
- Do not remove your splint unless you are instructed to do so by the therapist.
- Do not drive your car or ride a bike until instructed by your therapist
- Do not hang your hand down by your side as this may cause it to swell.

Exercises

Gentle movement of the tendon also helps to limit scar tissue sticking to the tendon and will begin to gently strengthen the tendon. You should complete only the exercises advised and at the frequency advised. Doing too many exercises may cause inflammation and the formation of extra scar tissue. Doing too few may lead to stiffness.



PATIENT INFORMATION LEAFLET

1. Using your good hand bend your injured finger(s) down as far as you can. Repeat this exercise until the finger(s) bend easily. You may push the finger tips to touch the palm without harming the repair. Repeat this exercise for the other fingers.
2. With the wrist held forwards, straighten all the fingers to touch the back of the splint 10 times.
3. With the wrist held backwards gently bend all the fingers together from the tips 10 times. You must never force the fingers to make a full fist. It may take a few weeks to be able to bend the fingers fully.
4. With the wrist held backwards, place the uninjured hand in the middle of the palm and gently scratch the back of the fingers (10 repetitions).

Further information

The day surgery unit can be contacted on 02476 966861 / 02476 966868 (University Hospital), or on 01788 663264 (Hospital of St. Cross). For further information please contact Hand Therapy:

- at University Hospital Coventry & Warwickshire on 02476 966016
- at Hospital of St. Cross, Rugby on 01788 663257
- our specialist hand surgery nurse / hand-coordinator on 02476 965072

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 02476 966861 and we will do our best to meet your needs.

The Trust operates a smoke free policy.

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