



CMC Fracture/Dislocation Reduction and Pinning Therapy Instructions Laith Al-Shihabi, MD

0-6 weeks

Patients are treated with a home motion program for the first 6 weeks while a splint/cast is in place.

Splint:

-A short-arm cast will be in place for the first 6 weeks after the surgery.

4-8 weeks

Formal therapy will begin for all patients at 4 if finger stiffness is a problem or 6 weeks if not.

Splint:

-Discontinue cast and transition to a removable short-arm wrist brace to be worn for an additional 2 weeks.

Motion:

-Begin AROM/AAROM to finger and wrist joints.

-5 lbs lifting restriction starting at 6 weeks.

Edema Control:

Per therapist

8-10 weeks

Continue to focus on motion, begin strengthening. Goal is to complete formal therapy by 10 weeks unless additional work conditioning is required.

Splint:

-Wean from the brace, with goal to discontinue daytime use by 8 weeks.

-Brace may be used with heavy activities if needed up to 12 weeks.

Motion:

-Begin PROM exercises in addition to AROM/AAROM to thumb and wrist.

-Begin strengthening with putty at 8 weeks with gradual advancement.

-15 lbs lifting restriction at 8 weeks.

-No restrictions after 12 weeks.

-Transition to home exercise program vs. work conditioning program PRN at 12 weeks.