



Finger MCP Joint Collateral Ligament Repair/Reconstruction

Patient Postoperative Instructions

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0-2 weeks

Pain medication:

- Use your prescription pain medication as needed to control pain.
- If your arm was numbed (blocked) for the surgery by the anesthesiologist, begin taking pain medication before the block wears off.
- Do not drive or operate machinery while taking narcotic/opioid pain medication.
- Unless you cannot take them for other medical reasons, it is ok to use over-the-counter anti-inflammatory medication (e.g. Advil or Aleve) in addition to your prescription pain medication. Do not take tylenol as your prescription already contains this medication.

Post-op Dressings:

- Keep the dressings and splint in place until your first postoperative visit.
- Elevation of the hand, along with ice on-and-off for 20 minutes at a time, will help with swelling and pain.
- It is ok to shower, but the dressings must stay clean and dry. Place a waterproof covering over the dressings while bathing or showering (such as a heavy plastic bag that is sealed with Saran wrap).
- If the dressings get dirty, wet, or come apart please contact the office to have the dressing re-done.

Motion:

- Start moving your fingers that are not in the splint as soon as possible.
- Work on moving your palm up (supination) and palm down (pronation), along with flexing and extending your elbow.
- You can use your hand for light activity, such as eating, drinking, or using a computer.
- Do not lift, carry, push, or pull anything heavier than a glass of water or can of soda.
- Avoid pinching with your injured finger as this puts stress on your repair.

2-6 weeks (First post-op visit)

Splint:

- The postoperative splint and sutures will be removed at your 2-week visit.
- You will be placed in to a removable wrist splint by hand therapy.
- The splint can be removed to wash your hands, or when performing hand therapy exercises, but otherwise should be worn full-time.
- You can begin gentle scar massage at 3 weeks after surgery.

Motion:

- Therapy will be started at 3 weeks for active motion exercises to the fingers and wrist.
- Continue to avoid lifting, carrying, pushing, or pulling anything heavier than a glass of water.
- Continue to avoid pinching with the injured finger.

6 -10 weeks (Second post-op visit)

Splint:

-Wean from the splint starting at 6 weeks. It can be worn at night for comfort if preferred, or with heavier activity.

Motion:

- Continue finger and wrist range of motion.
- Begin thumb/finger strengthening using putty.
- Begin gradual pinch strengthening at 8 weeks.
- You can lift/carry up to 5lbs (about 1/2 gallon of milk) as your symptoms allow at 8 weeks.
- You can lift/carry up to 10-15 lbs starting at 10 weeks.

10-12 weeks (Third post-op visit)

Splint:

-Discontinue use of the splint altogether if you have not already done so.

Motion:

- Continue thumb and wrist stretching.
- Continue grip/pinch strengthening.
- You can lift/carry up to 15 lbs.
- Transition to a home exercise program.

12+ weeks (Third post-op visit)

No further therapy beyond normal use of the hand should be required at this point. There are no lifting/carrying or other activity restrictions after 12 weeks, unless otherwise discussed on a case-by-case basis.