(PIP) Proximal Interphalangeal Joint Arthroplasty
Dr. Bakker’s Post-op Protocol

IMPORTANT INSTRUCTIONS FOLLOWING SURGERY:

- After surgery, your finger will be in a bandage and splint. Please DO NOT remove this. Try to keep your bandage clean and dry.
- To minimize swelling, you must keep your hand lifted up to your shoulder level.
- When sitting or lying, you should use pillows to support your surgically affected extremity, especially when sleeping.

REFERRAL TO HAND THERAPY:

- You will be instructed to make an appointment with hand therapy (OT) around 5 days following your surgery. Depending on the clinic where hand therapy will be performed, please contact our Edina office at 952-456-7000 or our Plymouth office at 763-520-7870.

WEEKS 0-1:

- Remain in post-operative finger splint
- Perform gentle range of motion activities of the fingers
- Ice 20-30 minutes three times daily
- Transition to Tylenol
- Attend therapy at 5-7 days post-operatively for the removal of the post-operative splint and fabrication of a custom finger extension splint, which will be worn continually for the initial four weeks post-operatively
  - ROM of the unaffected finger joints, wrist, and hand, edema control, and modalities as needed will be emphasized in early OT sessions
- Buddy splints will be issued to protect the joint from lateral forces. Forces towards the small finger should be avoided.
WEEKS 1-2:

- Return to clinic at the end of week two for suture removal and reevaluation
- You may get your surgical area wet after sutures are removed, but it is best to avoid submerging your incision for 1-2 days.
- Discontinuation of narcotics is expected, continue with Tylenol and ibuprofen as needed
- Continue with OT and the custom splint at all times other than performing therapeutic exercises.
- Avoid use of the affected finger in light functional activities.

WEEKS 2-6:

- Continue with therapy with the goals of increasing AROM, scar tissue management, edema control, and decreasing pain/inflammation
- Active bending and straightening exercise. You may move your finger with your other hand if motion is difficult. Conduct scar massage.
- No strengthening or rotational/twisting activities at this point.
- Transition to light functional activities (eg. Fastening buttons, handling money) with custom splint and buddy strapping at weeks four through six.

WEEKS 6-8:

- Return to clinic at 6 weeks for reevaluation and repeat imaging.
- Continue therapy, progressing to strengthening activities starting with 1 pound and increasing grip strength.
- Initiate weaning process from buddy splints and custom finger splint as tolerated, may remove when inactive or at home
- Able to transition to light activities as tolerated.

WEEKS 8-12:

- Progress strengthening at therapy, with discharge being expected during this time frame
- Functional activities involving rotational forces (eg. Opening jars, turning taps) are discouraged until week twelve post-operatively, but otherwise perform activities as tolerated at this time
- Follow up at week twelve for reevaluation and repeat imaging