

Carpal Tunnel Release

****DISCLAIMER:** Total length of rehab will vary depending upon the following factors: severity or acuteness of injury, age, health, or personal goals of the patient.

Phase I: 0-4 weeks

Goals for Phase I:

1. Educated in desensitization exercises around incision/hand.
 2. Progression from post-op splint to removable wrist splint.
 3. Full range of motion of fingers
 4. Minimal to no swelling in hand/fingers.
- A. Orthotics: Patient will be immobilized in post-operative dressing for 3 to 4 days. Patient will be progressed from post-op splint to a wrist splint during first post op visit. Wrist splint is to be worn 23 of 24 hours per day. (may remove wrist splint for finger ROM exercises, however, wrist must be maintained in neutral extension (15-20 degrees) at all times.
- B. ROM: Work to restore full range of motion in fingers immediately after surgery. Restore normal elbow/shoulder ROM as needed. Patient is not to begin wrist range of motion until 4 weeks post-op or when directed by physician. Wrist range of motion protected to avoid bowstring effect with flexion of wrist. (emphasis on finger ROM:A,AA,PROM, tendon gliding and joint blocking exercises,
- C. Strengthening: May do gentle grip and finger strengthening in the wrist splint. Begin with place and hold composite fist and progress with PREs as tolerated.
- D. Soft tissue management: wound monitoring (avoid getting stitches wet), swelling control, scar massage, emphasize desensitization over hand/wrist (for prevention Reflex Sympathetic Dystrophy)
- E. Modalities: Can utilize for pain, inflammation, swelling control, and/or muscle re-education as necessary

Phase II: 4 - 6 weeks

Goals for Phase II:

1. Functional wrist ROM
 2. Exhibits functional strength in wrist.
 3. Able to perform ADLs with minimal complaints (without splint).
- A. Orthotics: Progressively wean from wrist splint (use for work activity only & D/C per physician order)
- B. ROM: work to restore full active and passive ROM of wrist and forearm (A,AA,PROM as tolerated), volar/dorsal joint mobs only as needed to restore normal accessory ROM at wrist.
- C. Strengthening: begin with AROM before progressing to resistive exercises using theraband, tubing or free weights for the wrist. Begin grip strengthening using foam before progressing to thera-putty, digigrip, etc. Can progress to elbow/shoulder strengthening as tolerated.
- D. Soft tissue management: Continue scar massage, desensitization etc. as needed
- F. Modalities: continue as needed

Phase III: 6-12 weeks

Goals for Phase III:

1. Full wrist ROM
 2. Functional wrist/hand strength
 3. Performs ADLs without difficulty
 4. Begin sport/job related activities
- A. ROM: Continue as needed
- B. Strengthening: Progress to more aggressive exercises, increased resistance as tolerated.
- C. Functional activities: Begin specific job/sport conditioning.

Phase IV: 12 weeks to release

Goals for Phase IV:

1. Normal wrist/hand strength
 2. Return to full job/sports activities
- A. Continue strengthening, conditioning, and functional activities as needed