



**Flexor Tendon Repair: Modified Duran Program (early passive mobilization)
Post Operative Rehabilitation Protocol**

Following Surgery:

- Expect post op splint placed with:
 - **IPs** in full extension.
 - **MPs** about 70 degrees of flexion.
 - **Wrist** 20 degrees short of full flexion.
- Elevate and ice for at least 3 days.
- Continue to elevate as often as possible until your next clinic visit. (Elevate above your heart.)
- Shower with a plastic bag covering the splint and seal with tape.
- Take your pain medicine as needed and as prescribed. Call if any problems or questions arise.

Precautions:

- Do not straighten finger fully or flatten hand on table as this could rupture your repair.
- No gripping or lifting with the affected extremity to avoid rupturing the tendon.

3 Days Post Op (at therapy):

- Replace post-op splint with dorsal blocking splint.
- Initiate passive Range of Motion (ROM) exercises within restraints of splint and as directed by your therapist.

10-14 Days Post Op:

- Follow up appointment in clinic with P.A. or M.D.
- Sutures will be removed.
- Therapist will assist with edema and scar management.

4 Weeks Post Op:

- Follow up appointment in clinic with M.D.
- Initiate active flexion and extension exercises.
- Continue to wear splint in between exercises and at night.

6 Weeks Post Op:

- May discontinue dorsal blocking splint.

8 Weeks Post Op:

- Follow up appointment in clinic with M.D.
- Strengthening may be initiated with putty or light hand weights.

10-12 Weeks Post Op:

- Normal use of hand in activities of daily living is encouraged.

Considerations:

- No tight sustained gripping or heavy weighted resistance to hand and extremity permitted until 14-16 weeks.
- May continue to gain ROM for up to 6 months with everyday use.

Note: These instructions are to serve as guidelines and are subject to Physician discretion. Actual progress may be faster or slower depending on the individual.