Palmar Fasciectomy (Dupuytrens)
Rehabilitation Protocol
Kelly Holtkamp, M.D.

Please fax initial evaluation and progress notes to 815-381-7498.

1-3 Days Postoperative
- Do not remove the surgical bandage.
- Restrictions: The patient is allowed to begin light (2 lbs.) lifting and pulling. The weight can be increased as tolerated depending on the patient’s strength and comfort.
- The patient is to begin active and passive range of motion of the uninvolved fingers and thumb to prevent stiffness and reduce swelling.

10-14 Days Postoperative
- Sutures are removed at Dr. Holtkamp’s office.
- The therapist will fabricate a forearm-based extension orthosis to maintain maximal extension of the involved finger.
- The orthosis is to be worn at all times. The orthosis may be removed for hygiene purposes and to perform the exercise program.
- The therapist will instruct proper skin care to prevent skin breakdown. The skin should be completely dry before re-applying the orthosis.
- Instruct the patient to begin active and passive range of motion exercises to all digits.
- Educate the patient on anti-edema management. This includes, but not limited to, self-retrograde massage, cold therapy, and extremity elevation. The anti-edema management will continue for several weeks.

3 Weeks Postoperative
- The therapist will begin scar tissue management to decrease sensitivity and density, which could include ultrasound and/or silicone gel pads per therapist discretion. The scar tissue management will continue for several weeks.

6 Weeks Postoperative
- Instruct the patient to discontinue wearing the forearm-based extension orthosis during the day. The patient should continue wearing the orthosis when sleeping for an additional 6 weeks. Optional: The therapist can fabricate a hand-based extension orthosis in place of the forearm-based if patient desires.

8 Weeks Postoperative
- Instruct the patient to begin a progressive strengthening exercise program.

10 Weeks Postoperative
- Instruct the patient to continue their home exercise program for range of motion and strengthening.
• If the patient has not achieved functional range of motion and strength, then continue with occupational therapy for an additional 2-4 weeks.

12 Weeks Postoperative
• The extension orthosis may be discontinued. However, if there are signs of contracture, advise the patient to continue to wear the orthosis when sleeping.
• The patient may resume activities of daily living as tolerated.
• Work status: The patient is allowed to return to full duty status if the job requirements have been met. If not met, then a functional capacity evaluation and work hardening program may be recommended.
• The healing process can take up to a full year. Therefore, it is advised to continue with the home exercise program until goals have been met.