# DOSHER Physical Therapy









## **CMC** Arthroplasty Rehabilitation

#### **Maximum Protection (Phase 1-4 weeks)**

Goniometer Measurements
Thumb Carpalmetacarpal Joint
Abduction
Flexion
Extension
Opposition

Thumb Metacarpal Joint

Flexion Extension Opposition

Ice

Gentle mobilization grade 1 at CMC, MCP and IP joint Scar management (massage) Splinting

#### **Moderate Protection Phase (4-8 weeks)**

Ice with persisted edema

Moist heat

Paraffin if sutures have been removed

If sutures have not been removed you can place glove on patient to use parraffin.

#### **GENTLE STRETCHING OF THUMB**

#### I. Extensor tendon procedure

Abduction and adduction of CMC joint Grade 1 mobilization at MCP and IP joint

Radial and ulnar

Rotation

Distraction

Volar and dorsal glides

#### MCP and IP joint

Active assistant flexion and extension

### II. Flexor tendon procedure

Abduction at CMC joint

Flexion and extension at MCP and IP Joint

Gentle mobilizations at MCP and IP Joint

Radial and ulnar

Rotation

Distraction

Volar and dorsal

#### III. Abductor tendon procedure

Flexion and extension at MCP and IP joint

Gentle Mobilizations at CMC Joint

Gentle mobilizations at MCP Joint and IP Joint

#### **Active Assistant Strengthening Exercise**

#### I. Flexor tendon procedure

Active assistant only

Abduction

Active flexion and extension at MCP and IP Joint

Active flexion using:

Putty

Corn meal in box

**Towel Curling** 

Squeeze ball

Hand grip

#### II. Extensor tendon Procedure

Active assistant flexion of MCP and IP Joint

Active assistant abduction at CMC Joint

Active assistant wrist exercise

Flexion and extension

Radial and ulnar extension

Abductor tendon procedure

Active assistant flexion and extension CMC joint

Active assistant flexion and extension MCP and IP Joint

Abduction and adduction is limited so you do not re-injure or tear sutures