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HAND THERAPY REFERRAL GUIDE				
CONDITION	WHEN TO REFER	SPLINT	GENERAL TREATMENT PLAN	
Mallet finger	As soon as possible but can refer up to 6 weeks post injury	Custom thermoplastic extension splint for the DIP joint only	Bony mallet – 6 week full time splinting Tendinous mallet – 8 weeks full time splinting	
DeQuervain's Tendinopathy	As soon as symptoms arise but can be referred several months post initial onset on pain	Custom-made forearm based wrist and thumb splint. Neoprene splinting can be offered based on symptoms and patient circumstances.	Full time splinting for 4-6 weeks Followed by a graduated therapy program Other treatment techniques may include: Soft tissue therapy Taping InterX Advice on activity modification	
Carpal tunnel syndrome	At the onset of symptoms	Custom made thermoplastic wrist splint Soft splinting may be an option depended on patient and assessment by a therapist	Night splinting until resolution of symptoms ~ 6 weeks Partial daywear depending on severity of symptoms. Other treatment techniques may include: Advice on activity modification Exercise program	
Tennis elbow (lateral epicondylitis)	At onset of symptoms	Wrist splinting and/or counter force bracing may be required	Rehabilitation program to include: Soft tissue therapy Graduated strengthening Taping InterX Advice on activity modification	
Cubital tunnel syndrome	At onset of symptoms	Night elbow extension splinting – thermoplastic or prefabricated soft splinting	Splinting for up to 6 weeks or until symptoms resolve. Advice on activity modification is key. Home exercise program.	
Distal radius fracture	Conservative management – as soon as possible or directly after POP removal	Custom made thermoplastic wrist splint	Splint for 4-6 weeks depending on age and fracture type. Individualised home and in therapy exercise program Scar and oedema management as required	

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	Surgical management – 1 to 4 days post operatively		
Metacarpal fracture	Conservative management – as soon as possible or directly after POP removal Surgical management – 1 to 4 days post operatively	Custom made thermoplastic hand or wrist based splint depending on fracture location / position/ surgeon preference	Splint for 4-6 weeks depending on fracture type. Individualised home and in therapy exercise program is key for regaining functional movement Scar and oedema management as required
Finger fracturesProximal phalanxMiddle phalanxdistal phalanx	Conservative management – as soon as possible or directly after POP removal Surgical management – 1 to 4 days post operatively	Custom made thermoplastic splinting – finger, hand or forearm based depending on fracture location and doctor preference	Splint for 4-6 weeks depending on fracture type. Individualised home and in therapy exercise program is key for regaining functional movement. Scar and oedema management as required
 PIP joint dislocations Dorsal – possible volar plate involvement Volar – possible central slip involvement 	As early as possible – ideally 1-3 days post injury	Dorsal dislocation – custom made finger based dorsal blocking splint with the PIPj in 30 of flexion. Volar dislocation – custom made finger based barrel splint with the PIP held in full extension. Less severe injuries may be treated with buddy splinting or taping.	Splints are worn for 4-6 weeks and modified regularly as the injury progresses. Dorsal Dislocation – early active ROM is key. Volar dislocation – immobilisation to protect the tendon if necessary. Scar and oedema management as required
Scaphoid Fracture	Conservative management – as soon as possible or directly after POP removal Surgical management – 1 to 4 days post operatively	Custom made thermoplastic wrist splint Thumb included at Doctor request.	Full time splinting until fracture has healed – can be 6- 12 weeks. Individualised home and in therapy exercise program once fracture is stable Scar and oedema management as required

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