

Dr. Robert Wysocki

Metacarpal Fracture – Closed Treatment

0 - 4 weeks:

Splint: The patient is immobilized in a cast or clamshell splint, that leaves MCP free for base fractures, and extends across MCP for all others.

Motion: Joints which are not immobilized by the cast are put through active range of motion beginning on the first day.

4-5 weeks:

Splint: They are fitted with a resting safe position splint for wear in between exercises.

Motion: The cast is removed and active range of motion exercises are initiated to all joints.

When clinical healing has occurred (4-6 weeks), scar control electrical stimulation and progressive passive range of motion exercises are instituted as needed.

Two weeks after clinical union, the patients are allowed light prehension, lifting five pounds or less.

Four weeks after clinical union, the patients are started on resistive exercises and can return to light work duties lifting less than 25 pounds. Protective splinting is discontinued at this point except for sports level activities.

Eight weeks after clinical union, patients are released to sports level activities and medium or heavy work.