

Dr. Robert Wysocki

PIP Dislocation – Stable

Initial Treatment:

Splint: For those injuries stable throughout full extension, buddy taping alone is used and continued full-time for six weeks. For, all others, a dorsal blocking splint is fashioned with a 10 deg extension block of PIP. Splint is for night time use and during activities only.

Motion: Active and Passive Range of Motion exercises are initiated 15 min/hr. within the splint/buddy taping, with emphasis on full finger flexion. Edema control to the digit is emphasized with finger socks or Coban.

Weeks 3-4:

Splint: The Dorsal Blocking splint is adjusted to increase PIP extension 10 degrees each week, with plan to reach full extension at 5-6 weeks

Motion: Same as above, consider dynamic flexion splinting starting at 2 weeks, but if digital swelling is cause for lack of passive flexion focus on edema control

After 6 weeks:

Splint: The Dorsal Blocking splint or buddy taping is discontinued. Extension splints may be applied as needed.

Motion: Active and passive extension exercises are continued to the PIP and DIP joints.

The patient should have protective splinting worn during sports level or heavy labor activities until 12 weeks after injury.