

Rehabilitation Protocol Following Surgical Repair of a Spaghetti Wrist Injury Using the CoNextions TR[®] Tendon Repair System

After undergoing a procedure with the CoNextions TR[®] Tendon Repair System, a patient will begin their rehabilitation process. The patient will be guided by their surgeon to begin regaining their Range of Motion (ROM) of the repaired area(s). The patient should follow the advice of their surgeon or designated medical professional to get the best outcomes in healing after surgery. Rehabilitation often differentiates between each case and the surgeon’s preferences. This protocol is designed to give an example of the rehabilitation process to help guide patients through the post-procedural recovery process, ensuring optimal healing and minimizing potential complications.

Protocol

Dr. Brent Bamberger, DO FAOAO, and Kantessa Stewart, OTR/L CHT, at Orthopedic Associates of Southwest Ohio, provided the rehabilitation protocol for a Spaghetti Wrist case involving multiple tendons in the forearm/wrist. The forearm/wrist in this case were repaired using the CoNextions TR Tendon Repair System.

Week 0-2

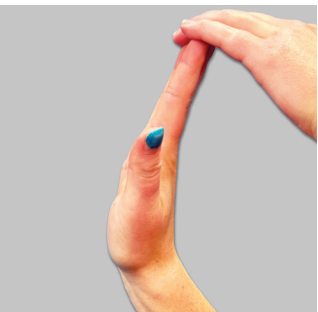
Splint: Use a Forearm Based (FB) P1 block splint. No active hand use except for exercises.

Exercises: (Out of the splint)

- 1) Active tenodesis, keeping the forearm in a neutral position due to Extensor Carpi Ulnaris (ECU) subsheath reconstruction.
- 2) All digit active range of motion (AROM), both extension and flexion.
- 3) Full digit extension passive range of motion (PROM).
- 4) Blocking for proximal interphalangeal (PIP) and distal interphalangeal (DIP) flexion.



- 5) Passive and/or active exercises into composite digit extension with the wrist in neutral or a slightly flexed position.
- 6) P/H exercises for composite digit extension with the wrist in a neutral or slightly flexed position.



- 7) Active tendon gliding exercises.
- 8) Wrist AROM.
- 9) Edema and scar management.

Week 2-6

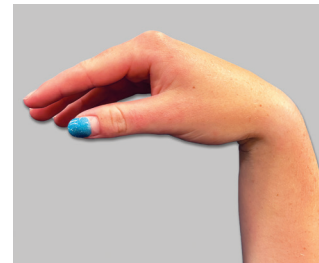
Splint: Use a Forearm Based (FB) P1 block splint. No active hand use except for exercises.

Exercises: (Out of the splint)

- 1) Continue exercises from weeks 0-2.
- 2) Wrist flexion active assisted range of motion (AAROM) progressing to PROM.
- 3) Extensor digitorum communis (EDC) glides.



- 4) Perform passive tenodesis to aid in wrist flexion while keeping digits extended.



- 5) Progress AROM exercises.

Week 6

Splint: Wean out of the splint for light daily tasks, continuing wear at night and for all strenuous activities.

Exercises: (Out of the splint)

- 1) Repeat exercises from Week 2-6 (steps 1-5).
- 2) Passive wrist flexion with fingers relaxed, progressing to composite wrist and digit flexion stretching IF patient has no extension lag.
- 3) Progressive light strengthening with yellow putty and tubing for grip, pinch, and wrist initiated.

Week 7-8

Wean completely from splint by 8 weeks post operation, progressing to full activity.

Conclusion

This protocol outlines the gradual progression of splinting and exercises over several weeks to rehabilitate and regain full function after a Spaghetti Wrist injury. It's important to follow the guidance of the medical professional overseeing the treatment.

This document is intended solely for the use of healthcare professionals. A surgeon must always rely on his or her own professional clinical judgment when deciding whether to use a particular product when treating a particular patient and rehabilitation protocol is case dependent. CoNextions does not dispense medical advice and recommends that surgeons be trained in the use of any product before using it in surgery. This material is intended for healthcare professionals. Distribution to any other recipient is prohibited.

For indications, contraindications, warnings, precautions see IFU www.conexionsmed.com or contact your local representative for additional product information.

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