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Wrist Arthroscopic Evaluation or Debridement

NOTE: For Some Surgical Procedures There May Be A Period Of Post-Operative Immobilization Prior To Initiation Of Therapy

Phases and Expected Time Lines	Therapy / Rehabilitation Guidelines	Expected Outcome At The Completion Of Phase	Notes / Comments
Phase 1: (Week 1 of Therapy) Immediate Post-operation Or Post-Immobilization	Monitor incision site(s) for infection, keep clean and dry until sutures out. Rest, Ice, Compression, Elevation - as needed for pain and edema control. Patient Education – Pathology, Recovery, Self-Management. Forearm-based wrist Splint with wrist in neutral, to be used at night and as required during the day, if needed, for rest and pain control. Use Hand / Upper extremity for painfree personal care and light household functional activities as tolerated. Therapy Program - (Note: Home exercises should be done ~ x3 / day): Full Active/Passive ROM Exercises Shoulder, Elbow – if limited. Forearm, Finger and Thumb Active/Passive ROM and Tendon Gliding exercises – as tolerated. Active wrist ROM within Functional Limits.	 Clinical Goals: Full (or pre-op) Active/Passive ROM – Shoulder, elbows, forearm, digits. Painfree, Functional Wrist ROM (see definitions). Sutures out ~ 7 – 10 days. Limited swelling and no pain at rest. RTW / Functional Goals: Independent, painfree personal care and sedentary to light (< 10 lbs.) household tasks. Tolerance to these functional tasks likely to be limited to less than 1 hour. 	Caution with Radio- Ulnar Deviation exercises if Repairs or Debridement.