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Fingertip Crush Injury - Distal Phalanx Fracture/Nailbed Injury

0 - 1 week:

Splint: The fingertip is immobilized in a gutter or alumafoam splint from out past the tip across the DIP joint, with the PIP free. The patient may also have a pin across the fracture site and possibly across the distal interphalangeal joint which may be outside the skin or buried. If it is outside the skin, they are instructed in pin care. Desensitization of the fingertip is begun as soon as the soft tissue envelope is healed.

Motion: Unrestricted of the PIP/MCP joints and the other digits

1 week:

Splint: Patients continue splint full-time except during ROM exercises

Motion: Active range of motion exercises are instituted out of the splint, including the DIP (if it is not pinned), 4-6 times daily. Patients may shower and get the nail wet but not scrub it.

3 - 4 weeks:

Splint: Can wean splint as tolerated, except during manual work or activity

Motion: Passive range of motion exercises are initiated if the fracture is clinically healed. Progressive strengthening is begun as tolerated. Can return to work with light duty lifting in splint.

6 weeks:

Can return to work and activity as tolerated without splint

Please call with questions or concerns at the phone number above.