Bennett’s Fracture

Post-op 10-14 Days:
- Edema control is initiated as necessary. Most commonly, this includes either 3” elastic bandage or elastic stockinette.
- A wrist and thumb static splint with the IP joint free is fitted to wear between exercise sessions & at night to protect the healing fracture. The splint is fitted with the thumb midway between radial and palmar abduction.

Post-op Week 6:
- Active & gentle PROM exercises are initiated to the thumb in flexion/extension, abduction and adduction & circumduction. ROM exercises are initiated to the wrist.
- The thumb spica splint is continued between exercise sessions and at night.
- NMES may be added to the therapy program to facilitate IP flexion, as needed.

Post-op Week 7:
- Dynamic flexion splinting may be added if dorsal capsular tightness is present at the MP or IP joint of the thumb. Typically, the splint is worn 3-4 times a day for 45 min sessions.

Post-op Week 8:
- The wrist & thumb static splint is discontinued during the day, except for heavy lifting.
- Gentle strengthening may be initiated to the hand and wrist.

Post-op Week 10:
- The patient may begin using the hand in normal daily activities.

If cast immobilization is the method of treatment for the initial 6 weeks, the therapy program begins at 6 weeks as outlined above. The course of therapy is similar for both conservative & post-op management.