EIP to EPL TENDON TRANSFER
Steadman*Hawkins Protocol

Post op
Surgical dressing removed, wound examined and redressed.
Thumb Spica or Wrist Cock-up: Immobilize wrist in 30 degrees, TH MP/IP joint in 0
degrees and TH in a functional resting position of abduction.
Follow extensor tendon zone 2 & 3 EPL protocol.
Educate patient in edema control and wound care (provide edema sheet).

1-3 weeks post op:
Gentle surgical area management to prevent adhesions.
AROM to uninvolved digits.
No use of the hands in ADL’s and NO PINCHING!

3 weeks post op:
Gently debride wound PRN and continue scar management.
Guarded AROM of flexion one individual joint at a time (IP, then MCP, then CMC) with
assisted extension at MP; all with wrist extension. No composite flexion.
Desensitization/Resensitization with progressive media applications PRN (towel, rice).

4 weeks post op:
Allow for TH IP movement via reduction of splint.

5 weeks post op:
Remove splint and do wrist flexion and extension 6-10 times a day. Beginning with
gentle, progressing to moderate effort.
Place and hold extension with other joints supported in extension.
Gentle active composite thumb flexion.
Closed fist ADL’s with splint on.

6 weeks post op:
Complete removal of splint.
Simultaneous finger and wrist flexion.
Begin gentle resistive grip and pinch activities.
ADL’s without resistance.

7-10 weeks post op:
Begin to progress use of thumb and hand in prehensile ADL’s.

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