

Soft Tissue Mallet Injury

This leaflet can be made available
in alternative languages / formats on request.

*如有需要，本传单可提供其他语言/版式
此單張的其他語言/格式版本可按要求提供*

Na żądanie ta ulotka może zostać udostępniona
w innych językach/formatach.

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Information for Patients

This is a follow-up leaflet to your recent telephone consultation with the fracture care team explaining the ongoing management of your injury. Your case has been reviewed by an Orthopaedic Consultant (Bone Specialist) and a Physiotherapist.

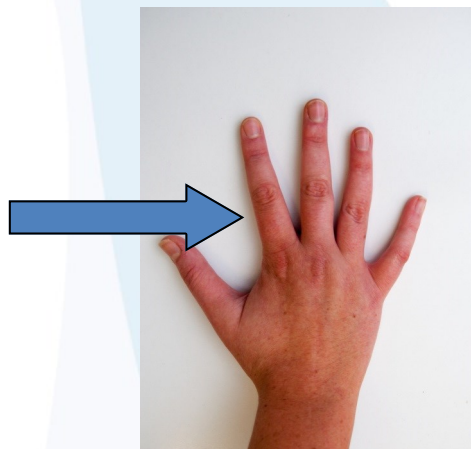
You have sustained a soft tissue mallet finger injury

This means that the extensor tendon, which attaches to the bone at the end of your finger and usually allows you to straighten it, has broken (as shown in the diagram below). This injury results in being unable to straighten the tip of the finger.

This normally takes up to twelve weeks to heal.

You will need to wear the splint provided full time for the first eight weeks to allow the tendon to heal. You will then need to wear it for a further four weeks at night. Do not remove the splint to shower, when you go to bed, or at any time other than for cleaning purposes as described on the next page. You may use the injured hand for light tasks but it is very important to keep the splint clean, dry and well secured with tape. It is important to keep the rest of your finger, your other fingers, thumb and wrist moving to prevent stiffness. Take pain killers as prescribed.

Please see the picture below to understand where this injury is.



If you are experiencing pain or symptoms, other than at the site of the original injury or surrounding area, or if you have any questions, then please contact us for advice using the contact details on the back of this booklet.

Smoking cessation

Medical evidence suggests that smoking prolongs fracture healing time. In extreme cases it can stop healing altogether. It is important that you consider this information with relation to your recent injury. Stopping smoking during the healing phase of your fracture will help ensure optimal recovery from this injury.

For advice on smoking cessation and local support available, please refer to the following website: <http://smokefree.nhs.uk> or discuss this with your GP.

Management / Rehabilitation Plan

Weeks since Injury	Rehabilitation Plan
0-8	<ul style="list-style-type: none">• Wear your splint at all times, including in bed at night.• Remove the splint once per week to wash and air the splint—follow the ‘looking after your splint’ instructions on the following page to ensure you are doing this safely.• Do not bend the end of your finger.• Complete Stage One exercises.
8-12	<ul style="list-style-type: none">• Use the splint at night only.• Start gently moving the end joint of your injured finger.• Do not include your injured finger in any heavy lifting.• Do not force the finger to bend.• Complete Stage Two exercises.
12+	<ul style="list-style-type: none">• The injury should be largely healed.• Stop using the splint.• Gradually resume normal activities as pain allows.• If the fingertip droops down then please contact us for further advice / management.• Symptoms will continue to improve over the next few months.• If you are still experiencing significant pain, swelling and / or stiffness please contact us for

Looking after your splint

You will need to remove your splint around once a week in order to clean the skin and change the tape holding the splint in place. It is very important that you do not bend the tip of your finger whilst the splint is removed; make sure you keep it fully supported on a flat surface such as a table top (placing your finger on your leg is not supportive enough).

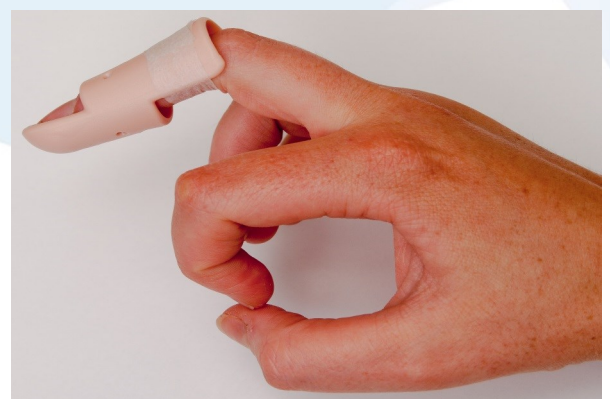
This process will be easiest and safest if you can ask someone else to help you and if you prepare everything you need before removing the splint. You will need a small pair of scissors, some skin wipes or a damp cloth, a dry towel or paper towel and a roll of tape to secure the splint to your finger (usually Elastoplast, which is available at most chemists, unless you are allergic to this then an alternative will be advised).

1. Remove the old tape from the splint and then carefully slide the splint off of the finger, ensuring the tip of the finger stays straight and supported on the table.

2. Clean the skin with wipes or a damp cloth then dry it fully, being careful to ensure that the fingertip does not bend. Also clean and dry the splint.

3. Once the skin and splint are completely dry, slide the splint back on to the finger and secure it with a strip of tape. Make sure the finger is held fully straight whilst the new tape is being applied.

4. You should be able to bend the middle joint of your finger in your splint. It is important to do this regularly to stop the joint from getting stiff. If your initial splint is too long to allow you to bend this joint do not worry; a new splint will be made to fit you when you attend hand therapy for an appointment.



Exercises

Stage 1 Exercises (3-4 times a day)

Finger and wrist flexion and extension

With the splint on –open and close your hand of your injured finger as shown 10 times.

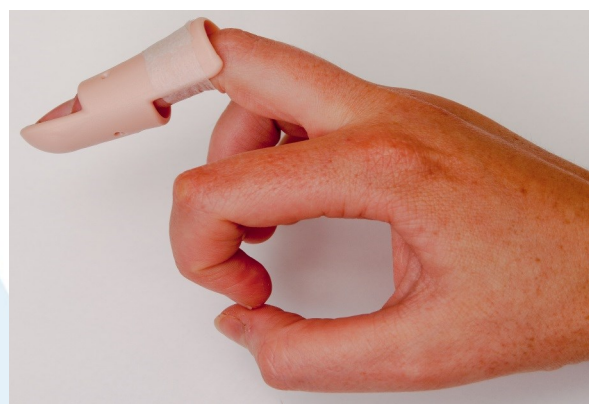
Then move your wrist up and down 10 times.



Finger flexion

With the splint on – bend and straighten your finger below the level of the splint.

Repeat 10 times.



Stage 2 Exercises (3-4 times a day)

Grip Strengthening

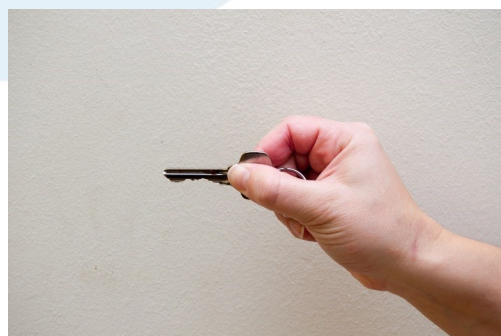
Squeeze a soft ball, playdough, plastic bottle or similar item.

Do this for 30-60 seconds.



Practice normal hand movements

E.g. turning keys, picking up small objects, doing crafts or anything that involves using your hands.



Contact Information

Patient Advice and Liaison Service (PALS): 0151 430 1376

Should you have any worries or concerns following discharge from hospital, please contact either:

Fracture Clinic: 0151 430 1403 (9am-5pm Monday to Friday)

Emergency Department: 0151 430 2399

Whiston Hospital
Warrington Road,
Prescot, Merseyside, L35 5DR
Telephone: 0151 426 1600

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