

Trigger Finger Release Protocol

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Phase I (Post-op Days 0–14) Early Motion and Wound Care Phase

- Soft dressing applied postoperatively; keep incision clean and dry
- Immediate active range of motion of fingers encouraged
- Emphasize full finger flexion and extension several times daily
- Edema control with elevation and ice as needed
- Light functional use of the hand for activities of daily living
- Avoid forceful gripping, repetitive grasping, or heavy lifting
- Pain control emphasized

Phase II (Weeks 2–6) Progressive Motion and Function Phase

- Continue active and passive finger range of motion to prevent stiffness
- Begin gentle tendon gliding exercises
- Scar massage and desensitization as indicated
- Gradual return to light gripping and functional hand use
- Avoid prolonged forceful gripping or repetitive activities

Phase III (Weeks 6–10) Strengthening Phase

- Progress to full, pain-free finger range of motion
- Initiate gentle grip and pinch strengthening as tolerated
- Advance functional hand use for work and daily activities
- Continue tendon gliding and stretching exercises

Phase IV (Weeks 10–16) Return to Activity Phase

- Return to unrestricted activities as tolerated
- Progress grip strength and endurance
- Gradual return to manual labor, sports, and repetitive hand use
- Emphasize ergonomic modification and activity pacing

****Special Considerations:****

- Early motion is critical to prevent stiffness and recurrent triggering.
- Transient soreness, swelling, or stiffness is common during early recovery.
- Persistent triggering, locking, or loss of motion should prompt reevaluation.

****Progression Criteria:**** Advancement is criteria-based and dependent on pain control, wound healing, restoration of motion, grip strength, and tolerance of functional activity.