



**Centers for  
Orthopaedics**  
*Experience in Motion*

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[www.orthoassociates.com](http://www.orthoassociates.com)

## SPLINT INSTRUCTIONS

I Type:       Dynamic \_\_\_\_\_  
                  Static \_\_\_\_\_

II Purpose:

III Precautions:

Wear splint for \_\_\_\_\_. Take it off and check for:

Redness that persists more than 20 minutes.

Swelling

Increased Pain

Areas of Pressure

If any of these problems are present then discontinue use and contact your therapist.

IV Wearing Schedule:

If no problems were present after wearing the splint then continue to wear splint for:

\_\_\_\_ 1. Daytime only

\_\_\_\_ 5. Stressful Activities

\_\_\_\_ 2. Nighttime only

\_\_\_\_ 6. Remove 4-5x's daily for any

\_\_\_\_ 3. At all times

prescribed exercises.

\_\_\_\_ 4. As tolerated

\_\_\_\_ 7. Keep hand elevated to reduce swelling.

V Care of Splint:

1. Keep your splint away from sources of heat such as water, open flames, radiators, car dash boards, hot sun, etc. This will cause splint to soften and loose its shape.

2. Your splint can be cleaned with cool soapy water.

VI Splints with Attachments:

1. If your splint has rubber bands than they should be replaced 1x/week with the same size rubber band.

2. A light steady pull on your fingers for a longer period of time is better than a hard pull for shorter periods of time.

**PLEASE REMEMBER TO BRING YOUR SPLINT WITH YOU TO ALL THERAPY SESSIONS.**

If you have any questions or difficulties with your splint, please do not hesitate to call your therapist.

Therapist: \_\_\_\_\_ Date: \_\_\_\_\_

Phone#:(207) 828-2121