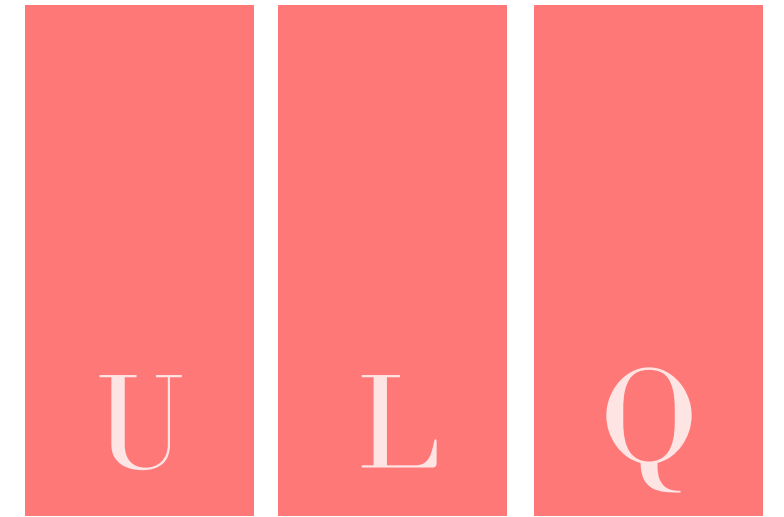


UPPER LIMB QUEENSLAND

24/7 Hand, Wrist, Elbow + Shoulder
Trauma Service



POSI:

Position of Safe Immobilisation

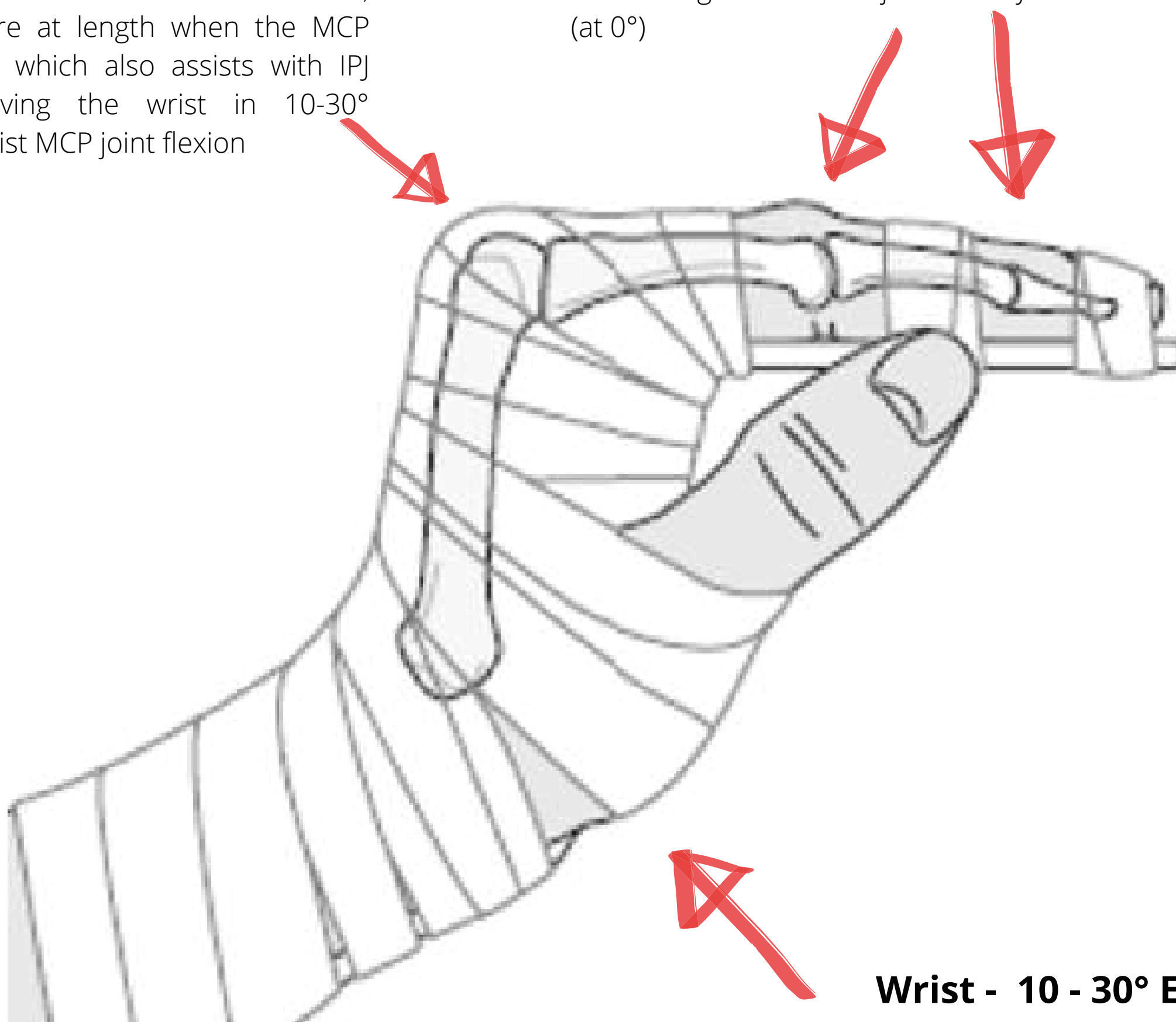
Describes the position to in which the ligaments and soft tissues of the hand are at length
Immobilising the hand in a POSI can reduce stiffness of the wrist, MCPJ, PIPJ, and DIPJs
The wrist may or may not be included depending on the location of the injury.

MCPJ: 70 - 90° Flexion

The collateral ligaments of the MCP joints sit slightly distal to the axis of rotation. Therefore, the collaterals are at length when the MCP joints are flexed which also assists with IPJ extension. Having the wrist in 10-30° extension will assist MCP joint flexion

DIPJ+ PIPJ: Full extension

The collateral ligaments of the PIP + DIP joints are at length when the joint is fully extended (at 0°)

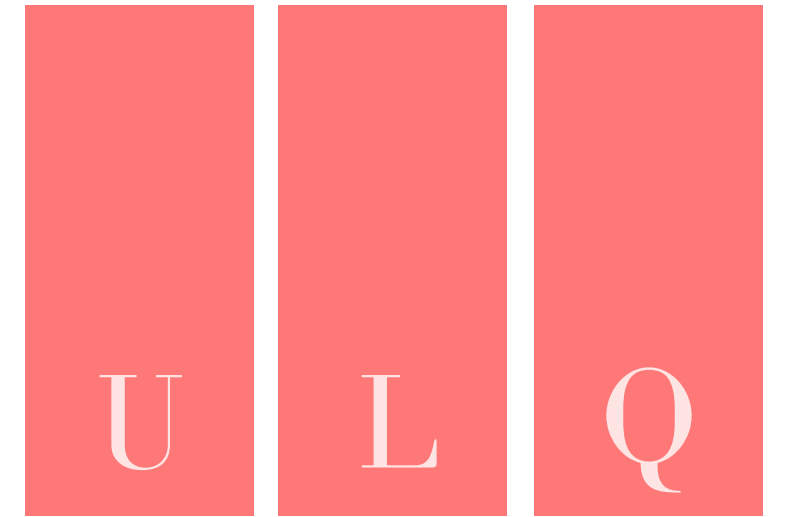


Wrist - 10 - 30° Extension

When the wrist is in a flexed position, it increases the tension on the extrinsic extensor muscles, which pull the MCP joints into extension. By placing the wrist into extension, the tension of the extrinsic extensors is reduced and their pull across the MCP joints is reduced

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Case Study

MOI: crushed right little finger by a car window while riding a bike

Injuries: central slip injury + significant skin loss + exposed of PIP joint

Operative Management: central slip reconstruction using the lateral bands, washout, skin debride and closure



Pre-operative injuries



10 days post operative management



The patient was placed into a POSI to allow the central slip and skin to heal for 4 weeks. The wrist was not included as the goal was to immobilise the DIPJ and PIPJ