# The Post-Surgical Elbow, Wrist, and Hand

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### Day One

<table>
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<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>7:30</td>
<td>Registration</td>
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| 8:00  | Plastic Anatomy and Physiology  
- Surface anatomy of the elbow, wrist and hand  
- Anatomy and kinesiology of the elbow, wrist and hand  
- Anatomic and physiologic differences between children and adults and between the elderly and adult patients |
| 8:45  | Case Examples/Lab  
Examination Lab  
- Accurate and thorough assessment of patient  
- Upper Quarter screen  
- Functional Assessment |
| 10:30 | Case Examples: Lab  
Clinical Wound Healing - Management  
- Treatment and management  
- Wound cleansing/dressings  
- Review of surgical procedures for wound management |
| 12:00 | Lunch (on your own) |
| 1:00  | Fracture Healing  
- Three phases of healing  
- Factors that influence healing  
- Complications in fracture healing |
| 3:00  | Tendon Injuries  
- Tendon healing and suture type |
| 4:00  | Stiffness/Scar  
- Post-operative care and the scar response |
| 5:00  | Post Operative Management of Pain and Inflammation  
- Patient education  
- Pharmacokinetics and the effect of therapy interventions  
- Analgesics and anti-inflammatory agents |

### Day Two

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| 8:00  | Splint Patterns Specific for Postoperative Patients (Lab)  
- Thumb spica  
- Short opponens  
- Dorsal/Volar cockups |
| 9:30  | Therapist’s Management of the Complex Injury  
- Treatment plan be established for various diagnoses of the elbow, forearm, wrist and hand  
- Compartmental Syndrome  
- Gunshot injury  
- Cross finger flap  
- Amputated finger |
| 10:30 | Discussion Q and A  
- Case examples/orthotic interventions |
| 12:15 | Lunch (on your own) |
| 1:15  | Common Elbow Injuries  
- Case studies  
- Elbow fractures and dislocations  
- UCL repair  
- Elbow arthroscopy  
- Patient history and observation  
- Postoperative precautions/therapy  
- Evidence-based protocols |
| 3:30  | Case Study-Group Discussion |
About the Educator

Rozanni Senanayake, OTD, MS, OTR/L CHT, has been practicing as an Occupational Therapist for over 20 years. She obtained her Bachelor of Science degree in Biology from Oregon State University and then a Master’s in Occupational Therapy from the University of Puget Sound. She went on to become credentialed as a Certified Ergonomic Assessment Specialist (CEAS) and as a Certified Hand Therapist (CHT). A strong believer in lifelong learning and evidence-based practice, she went on to obtain her post-professional doctorate in OT with an emphasis in hand rehabilitation. Her drive to help patients pushes her to treat a never-ending stream of patients that know they can rely on her careful treatment planning and informed clinical decisions.

After many years of working in other practice settings, Dr. Senanayake realized that she could help even more patients by starting her own practice. So in 2003, she founded Washington Hand Therapy, which has quickly grown to four locations. She shares her philosophy of lifelong learning, by making continuing education a priority for herself and her therapists and ensuring that all treatment is based on the most current evidence-based research. Under her guidance, the practice is driven by personalized care, where treatments progress the patients through the three-part path to wellness and functional recovery: pain relief, physical rehabilitation, and injury prevention/maintenance. Coupling strong positive results with strong relationships to referring sources, Dr. Senanayake and her therapists, truly differentiate themselves from other practices in the area.

It is without a doubt, that as a therapist, business owner, and lecturer, Dr. Senanayake has had a huge impact on a great number of both patients and therapists and her passion for the diffusion of knowledge and care only drives her to infect others to join her in her pursuit of positive patient experience.

Why You Should Attend This Course

How comfortable are you in managing a post-surgical patient? Are you dependent on generalized protocols, or can you think outside the box? Do you feel confident treating a post-op patient who walks into the clinic with bulky dressings and no prescription? Therapists who are not only empowered with the knowledge of healing properties of tissue, but also the evidence to support specific treatments, find that clinical reasoning produces much better outcomes than standardized protocols.

This two-day advanced course is designed to give you the tools needed to become a critical thinker when developing a comprehensive program for the post-op elbow wrist and hand.

A systematic overview of the anatomy/physiology and common structures involved in specific diagnoses will be provided along with healing timelines for fractures, nerves, tendons and soft tissue. Post-operative wound care will also be discussed, including dupuytrens release, pin/fracture care and incision/open wound management.

This evidence-based information will give you the confidence to progress your patient through the healing stages while considering the pathophysiology and pharmacological factors in the rehabilitation of your post-surgical patient. Review of post-operative diagnostic images will help increase your capacity to correlate imaging and clinical findings. Throughout this course, the importance of patient-centered care, professional collaboration and current evidence-based interventions will be emphasized to ensure exceptional patient outcomes.

At the end of this seminar, participants will be able to utilize clinical reasoning skills to establish treatment plans to promote proper healing and function in the post surgical elbow, wrist, and hand patient.

Course Objectives

Upon completion of this course the participant will be able to:

- Identify critical anatomical structures of the elbow, wrist and hand and the ranges of motion available at each joint.
- Identify plans and procedures integrating clinical reasoning and evidence to facilitate best outcomes on injured tissues.
- Understand and discuss the healing properties of tendon, nerves, ligaments and bone and apply the knowledge into any clinical situation.
- Identify common radiographic views of the upper extremity.
- Identify and explain the significance of the impact of abnormal skeletal findings on rehabilitation.
- Assess and treat post-surgical wound, with detailed patient education for follow through and patient compliance.
- Identify an appropriate dressing/treatment protocol for a wound, based upon exudate, wound status and products discussed.
- Identify common medications and side effects that may impede rehabilitation interventions.
- Develop appropriate rehab programs for specific diagnoses to include: Olecranon and radial head fractures, DRUK dislocations, Capsulodesis and ligament reconstructions, CMC arthropathy with AIN release, ORIF PIPFx & Hemi hamate arthroplasty and digital amputations.
- Apply the appropriate orthosis justifying healing structures and evidence-based protocols.
- Execute a patient-centered evidence-based treatment plan applying theory into practice.