Useful Tips

1. Choosing a size:
   There is variability in finger size from morning to afternoon, day to day, season to season and with activity level. You are choosing an average size that will fit well most of the time. Note that when people use splints consistently, their edema may decrease.

2. Evaluating the fit of a splint:
   Hold the finger in extension and gently push one side of the splint against the finger. Look on the other side of the finger to see if there is space between the ring and the finger. Normally there should be minimal or no space, however, if the joint is enlarged or has a contracture, there may be some space. It is normal to see space all around when the finger is flexed.

3. Adjusting splints:
   Sterling silver and gold are both malleable and durable. Small adjustments will not damage the splints. The rings can be gently spread apart or squeezed together to tighten or loosen the fit of the splint on the finger. Generally, one can increase or decrease the fit of the splint by ½ a size with this adjustment.

4. Over-adjusting splints:
   Frequent repetitive bending of the splint will gradually work-harden the metal and ultimately cause it to break. If one needs to frequently adjust the splint due to changes in edema or seasonal changes, having a second set of splints may be desirable. Shifting splints to different fingers on either hand may reduce the need to order all new sizes.

5. Splints that are too tight or too loose:
   If a splint cannot be made to fit by adjusting the angle of the rings as described in #4 above, the overall splint size should be increased or decreased by at least a whole size.

6. How tight should splints be?
   DIP splints should be very snug since they can be scraped off during functional activities. PIP and thumb IP splints should be comfortably snug. These are general guidelines; there are always exceptions.

7. Indentations:
   Individuals have indentations from wearing glasses, socks, watches and splints. The indentations from wearing splints are normal and useful for keeping splints in place. This helps reduce the likelihood that splints will be lost. It is important, however, that an indentation does not develop into a pressure sore. Some splints, such as the SIRIS Boutonniere Splint, may need to be shifted slightly from side to side while wearing so that the “spacer” is not always in the same spot.

8. Wearing time:
   When splinting mild, reducible deformities, many individuals wear their splints twenty-four hours a day because of the increased comfort, support and protection they provide. Individuals with fragile skin or flexion deformities may require a “wearing schedule” specified by the therapist to suit individual needs and tolerances.

9. Wearing splints at night:
   Since fingers tend to swell at night, it is not advisable to wear splints at night until one knows how the fingers respond. The type of splint, the severity of the deformity and individual preferences will determine whether splints are worn at night. It is generally not advisable to wear splints for flexion deformities overnight.

10. Choosing double extra-strength splints (XXS):
    For hands requiring a heavier duty splint, we offer a double extra strength (XXS) splint. Since this splint is not adjustable, confirm the fit in extra strength (XS) and adjust the angles of the rings (if necessary). Return this splint and request us to duplicate the angles in XXS. SPECIAL ORDER SPLINT

11. Correcting lateral deviation with the SIRIS Lateral Support Splint:
    The SIRIS Lateral Support Splint can be used to correct lateral deviation if the joint can be passively corrected and is not enlarged. It allows full flexion and is a good choice for early osteoarthritis, before there are
significant joint changes. It will not be effective on failed arthroplasties because of the enlarged joint, if there are Bouchard’s or Heberden’s Nodes or if the joint is fusiform shaped.

Understanding where the lateral support goes:
Three points of contact are needed to correct deviation. The lateral support is the center point (the fulcrum) and goes on the side of the joint opposite the direction of deviation. For example, if the end of the finger is deviating in an ulnar direction, the support goes on the radial border of the joint.

Correcting lateral deviation with the SIRIS Boutonniere Splint:
The SIRIS Boutonniere Splint gives a stronger corrective force than the SIRIS Lateral Support splint because the splint is longer. It will accommodate Nodes or an enlarged joint, however it limits full flexion. It is an excellent choice for the DIP joint when there are significant joint changes and when the lack of full flexion is not an issue.

Correcting PIP joint hyperextension greater than 20° with the SIRIS Boutonniere Splint:
When using the SIRIS Boutonniere Splint to limit hyperextension, the “spacer” positions the rings farther apart which increases the length of the splint. This extra length allows the splint to fit around an enlarged joint and/or be positioned to avoid Bouchard’s Nodes. It is also a good choice if there is limited ROM because it is easier to get on and off or if there is “bulging” on the volar aspect of the joint when the finger is extended.

Understanding the proximal volar extension (PVX) and why it is needed:
When splinting the MCP joint, the web space prevents thumb splints from going far enough proximal to support the joint. The PVX curves along the volar aspect of the thumb to support under the head of the metacarpal joint and gives better alignment at the CMC joint. It can be adjusted by bending it in or out to fit the contour of the volar surface of the thumb for an exact fit. Use when there is more than 20° of hyperextension.

Understanding the 15° and 30° slots in the Boutonniere Holder:
Using the 15° slot in the Boutonniere Holder makes the splint shorter and using the 30° slot makes the splint longer. When the SIRIS Boutonniere Splint is too long, the proximal ring rests too close to the volar crease of the adjacent joint. To prevent this, generally use the 15° slot for the proximal ring measurement of a PIP joint. Always use the 15° slot for the proximal ring of a DIP joint. Use the 30° slot for the proximal ring when a longer splint is needed.

There are always exceptions! The information throughout this booklet is a basic guideline. Please call or e-mail for more technical advice.