

Course Outline

Taping is designed to

- Protect and support the injured structure in a functional position during exercise/ proprioceptive program
- Limit unwanted joint movement
- □ Allow for optimal healing
- □ Protect from further injuries i.e. soft tissue structures
- □ Mechanical correction of soft tissues
- □ Functional correction through sensory stimulation to either assess or limit the motion
- Lymphatic correction through “channeling”

- Fascial correction - “Holding” to align the tissue in the desired position

- Space correction (lifting)- Used to create more space directly above the area of pain, inflammation swelling or edema.

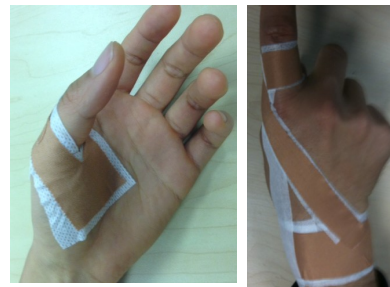
- Ligamentous and tendon correction through “pressure”. Used to create increased stimulation over the area of the ligament or tendon resulting in increased stimulation of the mechanoreceptors (receptors which respond to mechanical pressure i.e. touch

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preventing overuse and decreasing pain and inflammation to the involved structures. Taping is beneficial over splinting as it prevents the unwanted movement and yet allows for regular stretches throughout the day without having to remove a cumbersome brace. In **Carpal Tunnel**, it prevents resting and typing thus avoiding pressure and limiting wrist extension which is proven to increase pressure in the carpal canal from 27 to 37 mm / Hg. In case of **Dorsal Wrist Ganglion**, it prevents wrist extension thus preventing pain on the dorsum of the wrist, and allowing the swelling/ ganglion to subside by preventing the repetitive irritation to the area.



MP Hyperextension/ RCL Index taping:



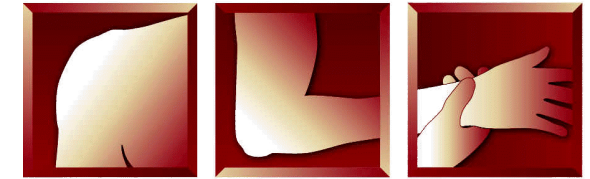
If you are interested in learning more about some other conditions which may benefit from taping to the upper quadrant, please feel free to contact us.

Main Location

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Hands-on-Care



Specializing in Shoulder, Elbow, Wrist and Hand Therapy

TAPING FOR THE UPPER QUADRANT

A general guide to taping



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TAPING FOR THE UPPER QUADRANT

- “Mechanical Correction” Used to assist in correcting the position of a joint or bone

HOW DOES IT WORK

↑ Conscious Awareness + ↑ Perception of Stability = ↓ Fear of activity



Some commonly used taping techniques

Shoulder:

- Shoulder postural taping
- Impingement syndrome
- Shoulder dyskinesia
- Shoulder MDI

Elbow:

- Cubital Tunnel
- Radial Tunnel
- Lateral Epicondylitis

Wrist:

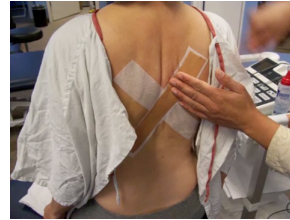
- Carpal Tunnel

Thumb:

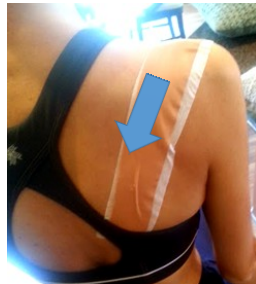
- MP hyperextension

Shoulder: Postural taping

This taping assists TOS and upper trapezius syndrome patients with general improvement in posture. The taping provides a proprioceptive input when they slouch and encourages them to perform scapular setting, by retracting the scapula back and down, correcting the posture, thus decreasing symptoms.



Shoulder: Impingement



Shoulder impingement taping assists with posterior tilt of scapula thus increasing the rotator cuff interval

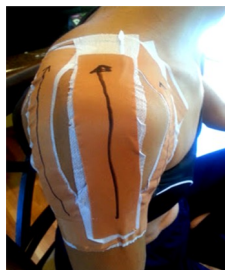
Scapular Dyskinesia:

Taping is done to provide posterior tilt along with elevation of scapula, holding the scapula in position



Shoulder MDI:

Assists the muscles in holding the humerus in the glenoid cavity, while working on strengthening the rotator cuff muscle. This allows to work the muscle in the correct position which prevent losing the work achieved with exercises.



Elbow: Cubital tunnel

Cubital tunnel is managed with a brace at night time. However, during the day patients are not aware of their body position which can exacerbate their symptoms. This taping assists in providing a proprioceptive input to train the person in correcting their position while working on the computer or leaning on the elbow, thus allowing faster resolution of symptoms.



Elbow: Radial tunnel

Radial tunnel taping provides instant relief to the affected musculature. The effects of myofascial treatment done to the forearm musculature is lengthened by taping. It relieves the pressure from the radial nerve passing between the supinator. Taping is done by lifting the mobile wad to relieve the pressure on the nerve, thus providing instant relief and long term results.



Elbow: Lateral epicondylitis, Wrist: Carpal Tunnel and Dorsal Ganglion Taping

Same taping technique is used for the above conditions. In case of **Lateral epicondylitis**, it provides the input to avoid activities with wrist in extension thus