



The Hand & Upper Extremity
CENTER OF GEORGIA, P. C.
SURGERY OF THE HAND, ELBOW AND SHOULDER

AFTER YOUR SURGERY – Frequently Asked Questions

At *The Hand & Upper Extremity Center of Georgia*, our goal for you or your child is always a successful surgery and as quick and comfortable a recovery as possible. Your well-being is always our first priority. This section will help educate you on the recovery process, what to expect after surgery, and will provide you with some helpful recovery tips. Your physician will give you specific instructions prior to your departure from the office, ambulatory center, or hospital where your surgery was completed, and those instructions should supercede anything you read here, should there be any contradictions. Of course, we are available 24 hours a day at (404) 255-0226, and encourage you to contact us with any questions or concerns.

QUESTIONS YOU MAY HAVE AFTER SURGERY

What Should I Expect Immediately Following Surgery?

Immediately following surgery, you (or your child) will spend a period of time in a Post-Anesthesia Care Unit (PACU), a.k.a., Recovery Room. *(The only exception is if your surgery is performed using only local anesthesia; if so, you simply check out of the office/surgery center once the procedure is completed.)* The time you spend in the PACU allows us to monitor your immediate recovery from the anesthesia. Your vital signs will be carefully monitored, any pain will be controlled, and your needs will be addressed. You may have a drain to help limit any internal bleeding within your hand/arm. Your time in the PACU can vary from 20 minutes to more than an hour, depending on the speed of your initial recovery. Both an anesthesiologist and a special PACU nurse will care for you until you are alert, stable, and your pain is well controlled. Once you are cleared to go, you will either check out of the surgery center/hospital or you will be transferred to your hospital room if your surgery requires an overnight stay. Remember, you **must** have someone to drive you home after your surgery, unless you've only had a local anesthetic and feel comfortable driving yourself.

What Should I Expect as I Recover?

Once you have left the Surgery Center/hospital, your experience may be different from other surgical patients, based on the kind of operation you had. While we perform a great variety of different operations due to the vast number of different conditions we treat, there are several similar threads to the post-surgical experience.

Post-operative Pain

Some degree of pain or discomfort is nearly unavoidable following surgery. Fortunately, for many of our procedures, the degree of discomfort is minimal and may require medication for only a day or so. There are other procedures, however, that will result in greater degrees of pain that may last longer. Either way, rest assured that your comfort is of utmost concern to your surgeon.

There are several steps we take to make your recovery as comfortable as possible. First, we typically infiltrate the surgical area with **local anesthetic** to keep the area numbed in the immediate post-operative period. This type of anesthetic is specifically designed to be long acting, and can continue to keep the area numb for 6-24 hours after surgery, depending on how quickly your body metabolizes the medicine. If your surgery involves fingers, be aware that the operative fingers, and possibly their neighbors, can remain numb for up to 24 hours. Similarly, if your surgery involved the wrist, there may



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be parts of your hand and fingers that remain numb for a substantial period of time. You may worry that the numbness means you are not getting circulation. Our typical post-operative dressing/splint/cast allows you to easily monitor the color and tone of your fingers/thumb so that you can check and assure yourself that your circulation is fine.

Secondly, you will be given a prescription for strong **pain medicine** that you will need to fill at a pharmacy. We typically prescribe narcotic based medications. We recommend that you cover yourself, or your child, with pain medicine at regular intervals (detailed on the prescription) for the first 24 hours or so after your surgery. Afterwards, you can gauge your degree of pain, and determine to what extent you require further medication. The key to keeping your surgical pain controlled is to keep yourself as comfortable as you can for the first day or so. This will help the rest of your recovery go more smoothly.

If you find that your pain level is high, make sure that you are keeping your extremity elevated to minimize swelling, and also decide if your dressing/cast/splint feels too tight. If so, please contact us immediately at (404) 255-0226 so that we can counsel you through some steps to help you. If your swelling is controlled and your dressing is comfortable, then check that you are taking the appropriate dosage of prescribed medication. If so, then you can take an additional anti-inflammatory type pain medication such as Advil™/Motrin™ (ibuprofen) or Aleve™ (naproxen) since these will not negatively interact with the pain medicine prescribed. **DO NOT TAKE TYLENOL™** (acetaminophen) while you are taking your prescription pain medication, since most of them already contain Tylenol, and could result in an inadvertent overdose/excess dose. If your pain persists, please contact us at (404) 255 -0226 so that we may assist you.

Like all medications, prescription pain medicines occasionally cause side effects. Please be sure to read the information your pharmacist provides with your prescription.

One of the most common **side effects** is itching. If you (or your child) experience itching, take an over the counter antihistamine like Benadryl™ (follow dosage recommendations on the label), and contact us. If you experience more than simple itching, and develop a rash or hives, stop taking the pain medicine, and contact us immediately; this means you have an allergy to the medication, and this should be noted for your medical record. Another common side effect is gastrointestinal upset (mild stomach discomfort, constipation, loss of appetite, nausea or vomiting). Try to take your medication with food or milk and stay well hydrated to try and avoid these problems. As always, contact us if you are experiencing difficulties with your medication.

Post-operative Edema (Swelling)

Surgery is a controlled injury designed to make you 'better.' Your body's natural reaction to surgery and injury is to mount a healing inflammatory response. Swelling, to some degree, is something we cannot avoid following procedures and is necessary for healing, but there are steps you should take to minimize it. Too much swelling can constrict your hand/arm within the post-operative dressing and this can result in excessive pain. Too much swelling will also create problems with internal scarring, and make it harder to mobilize joints which can lengthen your overall recovery from the surgery. These problems are fortunately rare, but we want you to pay attention so that it does not become a problem for you or your child.

What can you do? – For one, keep the operated part elevated as much as you can for the first 24-48 hours after the procedure. Imagine where your heart is, and then try to keep your operative site above it as best you can. Prop your arm up when sitting and relaxing, and use extra pillows for sleeping that can keep your hand/arm above the level of your heart. It is difficult to do this if your shoulder was operated



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on, or if you have a large splint/cast, but we ask you to do the best you can. Another step you can take is to keep all non-immobilized joints moving; for example, make a fist and straighten whatever fingers are not immobilized. The ‘pistoning’ effect of this motion will help pump the excess inflammatory fluid out of your operated hand/arm. Finally, keep the operative site cool. Use an ice pack, or frozen vegetable package, and apply it over the splint/dressing for the first day; however, some dressings/casts are so thick that you will not be able to cool down the extremity. Again, do the best you can.

Call us immediately at (404) 255-0226 if your operative site feels painful and squeezed by the dressing/splint/cast, or if you feel that swelling is keeping you from moving your joints.

Post-operative Dressing/Splint/Cast Care

All wounds need to be protected in a sterile environment for a period of time to allow them to start healing and to help prevent infection. The specific operation you had may also dictate that certain parts of your hand and arm are immobilized (kept from moving) to allow for healing and to maximize the success of the procedure. For example, a repaired bone will require a period of protection and immobilization to allow it to heal properly. Excision of a skin cyst, on the other hand, requires only protection of the wound and does not require the immobilization of joints and bones. An additional reason for post-operative immobilization in a splint or cast is to help control immediate post-operative pain, and to keep you comfortable. Do not remove the post-operative dressing/splint/cast prior to your post-operative visit unless your surgeon instructs you on when and how to do so.

We encourage, and in fact, require you to move all parts of the arm/hand that are not protected and immobilized by the post-operative splint/cast. This will keep your joints from getting stiff and will help to control edema (swelling). For example, if your wrist is immobilized in a splint following the removal of a ganglion cyst or fixation of a wrist fracture, your fingers, elbow and shoulder are not immobilized, and you should keep them all moving post-operatively.

Unless your surgeon allows you to change your dressing or remove your splint prior to your first post-operative visit to the office, you will need to keep it clean and dry. You can use any trick you like, but invariably you will need to keep it temporarily wrapped in a waterproof bag while bathing. Plastic umbrella rain bags work the best, but we are confident that you will find a bag around the house that will work well. Slip your arm into the bag and wrap the bag snugly around your upper arm, securing with tape. Do not use string or rubber bands since they can get quite tight and potentially cause injury. Make sure you remove the bag once you are done bathing. Do not go swimming with your post-operative dressing/splint/cast.

What to do about itching? Do not stick anything underneath to scratch. Your skin tends to become a little fragile under the dressing/splint/cast, and there is a good chance you will injure your skin which could lead to problems like infection. Do not put any powders or salves under the dressing as these can cause irritation or other skin reactions that can lead to real problems. Try an oral, over the counter antihistamine like Benadryl (follow directions on the package). You can also use a hair dryer set on cool to fan the skin.

You may find that your young child receives a splint/cast that goes above the elbow even though his/her surgery was for the hand or even a finger. Do not worry; this is intended to protect your child from themselves. By placing the cast above the elbow with a 90 degree bend, your child will not be able to easily remove the splint/cast and potentially jeopardize the surgery. We will often do this for the youngest of children who might have trouble understanding what they are going through.



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What do I need to be monitoring during the Post-Operative Period?

At The Hand & Upper Extremity Center of Georgia, we always strive to maintain an open line of communication with you while you recover from surgery. If you have concerns of any kind, please communicate them promptly so that we can help determine if they require immediate attention. By calling our office, (404) 255-0226, 24 hours a day, seven days a week, you will be put in touch with your surgeon, his staff or the on-call physician who will be able to answer your questions. With that in mind, the following discussion is intended to educate you so that you can help yourself optimize your recovery. This discussion is not all-inclusive, so if something comes up and you are not sure what to do, please call.

Since your wound will be covered by a sterile dressing after surgery, you will not be able to monitor it until either you have been instructed to remove it or until your first post-operative visit. Wound infections are rare, and they usually occur somewhere around one week after surgery. Were your wound to become infected, you would notice increased pain at the area, you might feel ill with flu-like symptoms, and you might have a slight fever. Unless you are feeling truly ill, there is no need to monitor your temperature in the first 24-48 hours after surgery since nearly all patients will have episodes of fever from the combination of surgery and anesthesia. Wound drainage is something you might notice as bleeding showing up on the dressing/splint/cast. ***Please notify us if any of the above seems to be occurring.***

We would like you to monitor the circulation going to your fingers/ hand in the post-operative period. By just keeping an eye on the color of your skin, you will be able to make sure that it is filling with blood and staying warm. We would also like you to monitor your swelling. If you start to experience too much swelling, the splint/cast may compress the part of your hand/arm that is immobilized, and your pain will increase. This increasing pain will not be responsive to elevation and medication. If you sense that you have an extraordinary amount of swelling, please contact us immediately so that we may counsel you through the process of loosening the dressing, or advise you to come to our office or emergency department so that we can loosen your dressing for you. We absolutely do not want you to wait until the next morning or day!

Numbness following surgery is common and is typically related to local anesthetics you may have received prior to the completion of your surgery. You may also have numbness from some of the regional anesthetic blocks that are used for the surgery itself. You will have received instructions on what to expect. Increasing numbness, either in intensity or location, is something you should let us know about. It could be related to the dressing/splint/cast, the position in which you are holding your arm, or it could be a complication of surgery. Please contact us promptly should you experience this very rare circumstance.

What Activities are OK After Surgery?

After surgery, we ask that you limit your activities with the affected arm/hand for a period of time. Your surgeon will provide you with your specific limitations. While this may seem like common sense, we cannot emphasize this enough. In general, we ask you not to lift anything with the operated extremity, or work with it until you are specifically cleared or instructed to do so by your surgeon. Such liberties depend on the exact procedure. We may, for example, ask you to return to normal activity as pain permits following the release of a trigger finger; but, may ask you not to lift anything greater than one pound for a period of time after repairing a ligament inside your wrist. If you have any doubts or questions, do nothing with the limb until you are able to communicate with your surgeon or their staff and they have cleared you for activity.