Hand Surgery Post-Operative Instructions

Pain Control:

Pain after surgery is to be expected. Percocet or Vicodin should be taken in the form of 1-2 tablets every 4 hours as needed. You can also take up to 800mg of Motrin every 8 hours as needed for pain. You will likely need these medications frequently for the first 1-2 days after surgery, however as the pain improves, begin to wean off the opioid pain medication. If you received a pain block from anesthesia, take pain medication prior to going to sleep on the day of surgery as these blocks typically wear off in the middle of the night. You have also been provided with a stool softener (Colace/Surfak). Take this daily to prevent constipation resulting from the Percocet or Vicodin. The third medication (Phenergan or Zofran) is to take as needed for nausea. The fourth medication is aspirin 325mg daily for blood clot prevention. Take this for 14 days after surgery.

Activity/Dressings:

Keep your hand/wrist in the post-operative dressing for 3 days at minimum. If you are in a splint, leave this in place until your first follow up visit. You may shower or bathe, but ensure the operative extremity does not get wet while the dressing is in place. Finger motion is encouraged in the dressing/splint. No lifting with your operative hand until instructed by your surgeon. Your specific rehab protocol will be discussed at your first post-operative visit.

Showering:

Once dressings have been removed you may shower by letting water run over the wounds. Do not scrub the wounds. NO SUBMERGED BATHING IN HOT TUBS, POOLS, OCEANS, BATHTUBS for 4 weeks after surgery.

Occupational Therapy:

You will be instructed on specific rehab protocols for the procedures performed which will begin at after your first follow up appointment. Some procedures will not require therapy and others will require more extensive therapy. You will be referred to a civilian therapist, as there are no occupational therapists at NHCNE.

Diet:

Resume your regular diet after surgery. Increase use of fiber and drink plenty of fluids to prevent constipation from the anesthesia and narcotics. Avoid the use of supplements however multivitamins may be taken. Do not drink alcohol while taking narcotic pain medication.

Convalescence/Driving:

We strongly recommend against automobile travel longer than 2 hours or airline travel within the first 2 weeks of surgery due to increased risk of blood clots. NO DRIVING OR OPERATING MACHINERY WHILE TAKING OPIOID PAIN MEDICATION.

Follow Up:

You should have an appointment scheduled with your surgeon 4-14 days from the day of surgery. If not, please contact our clinic as soon as possible.

GO TO THE EMERGENCY DEPARTMENT OR CONTACT ANESTHESIA IF YOU EXPERIENCE:

Headache following spinal anesthesia

Prolonged dizziness

Weakness

Unexplainable sensations or experiences recalled from your operation/procedure.

RETURN TO THE CLINIC OR EMERGENCY ROOM FOR THE FOLLOWING:

- Increasing pain or swelling not relieved by medication, ice, or elevation
- Redness, warmth, increased incision tenderness, drainage, or foul smell
- Bleeding that does not stop
- Numbness in the leg or foot
- Temperature >101.4F
- Any other concerns

Questions or concerns? Call the clinic at 615-936-7846 or use your MHAV portal to send a message to the triage nurse.