



Carpal Tunnel Release and First Extensor Compartment Release

Discharge Instructions-

Comfort

- Discomfort increases 1-2 days after surgery due to the nerve block wearing off (if a nerve block was performed). This can be helped by oral pain medication. It is safe and normal.
- **Cold therapy** – This will greatly reduce pain and will help with swelling for the first 3-5 days after surgery, as well as following PT sessions
 - Some patients may be provided an ice machine to go home with
 - This is dependent on the type of surgery you had and insurance approval
 - If you were not provided with an ice machine, regular ice pack/ bag of ice can be used
 - You may use ice 20 minutes on, 20 minutes off, as often as you wish
 - Always keep a cloth barrier, such as a towel, between the cold and your skin

Medications

Your post op medications were sent to the pharmacy we have on file prior to surgery

- Please reach out to our office if you need a refill of your medication, preferably, 24 hours prior to your last dose to allow time to fill

1. Aspirin 81 mg: For anticoagulation to help prevent blood clots

- If you are >19yo, you must take one 81mg aspirin once a day for two weeks Do not take aspirin if you are <19yo

2. Meloxicam 15 mg: For antiinflammation to help pain and swelling

- Take once a day for four weeks as tolerated for post-op inflammation

3. Zofran (Ondansetron) 4 mg: For nausea – It is common to experience nausea from anesthesia and/ or pain medication in the first few days post op

- You can take 1 tablet every 8 hours as needed for nausea
- It is a dissolving tablet that is to be placed on your tongue – allow it to dissolve, and swallow

4. Norco (Hydrocodone/Acetaminophen) 5-325 mg: For pain – This is a narcotic medication for pain, to be taken AS NEEDED

- Take 1-2 tablets every 4-6 hours as needed
- After 1-3 days, you can begin to space out the dosing/ discontinue the medication, transitioning to a step-down regimen of Tylenol and ibuprofen as soon as pain allows
- Common side effects such constipation, nausea, and cognitive impairment may occur
- It is very common to use the pain medication only at night to help sleep better or around the time of therapy so you can participate more comfortably

Other medications: For constipation – over the counter remedies such as Colace (Docusate Sodium) or Miralax as needed

- Both the anesthesia and the pain medication can cause constipation

Activity

** You will start PT Immediately post op***

- You should start at home exercises on the day of surgery to work on motion/ mobility
 - Exercises: Please practice making a fist and straightening out your fingers **at least 5x/day for 3-5 minutes per session**
 - No lifting >5 lbs for the first 2.5 weeks post op



- Please keep your arm elevated above the level of your heart whenever possible to help with pain and swelling.
- Generally take it easy over the next several days. It is normal to feel fatigued. Allow your body time to recuperate.
- We suggest ankle pumps and circles when seated/laying for any period of time to help lower extremity circulation.
 - Do not sit for more than 30-45 minutes at one time to help prevent blood clots in your lower extremities.
- Driving – We want you to be safe and comfortable when you return to driving. We will discuss this more in the office. At a minimum, no driving until you have stopped taking the narcotic.

Wound Care

*** The bandages were applied under sterile conditions in the OR, and we want to avoid bacteria near the incision***

- Your incisions are covered by several absorbent pads, gauze, a white cotton bandage, and an ACE wrap. Please leave this in place for 3 days post-op
 - Do not get the bandages wet for 3 days after surgery—so this means using a bag over the limb for showering, holding it out of the shower, etc.
 - If the ACE wrap feels too tight, you can loosen it and rewrap it, *but please leave the white dressing and other bandages in place until 3 days post-op.*
- **After 3 days, you may remove the wrap** (ACE/ cotton bandage and gauze) but continue to keep the incision clean and dry (covering in the shower)
- If you have any concerns about the incision (redness, draining, swelling, pain), **you can call us and send us a picture of the incision (630)-377-1188 [Press 2 to leave a voicemail]**

Diet

- You may eat anything you like, but it's advisable to choose light, easily digestible foods and to drink plenty of water the day after surgery to avoid any nausea/ upset stomach

When to call your physician

If you require immediate attention, or feel that you are having a medical emergency please go to the emergency department for urgent work up

- You develop a temperature over 100.3° F degrees
- You have any drainage at the incision site 5 days or later after surgery
- The surgical area becomes hot to the touch, red, intolerably painful, or swells suddenly. (Note- some warmth, pain, and swelling are normal)
- You have persistent pain and / or swelling in your calf.
- You have any additional questions or concerns. We are happy to talk to you at any time!

Important contact information

Physician's office phone # (630)-377-1188 [Press 2 to leave a voicemail]

Please note- We are either in clinic or surgery and not answering calls in real time – Please leave a detailed message with our clinical voicemail line and we will return all voicemails within one business day. Additionally, the call center can connect you to the PA on call, however, please reserve this option for urgent inquiries only

Oak Brook- 2425 W. 22nd St. Suite 207A Oak Brook, IL 60523 P: (630) 377-1188 F: (630) 377-7360

Little Village- 2859 S. Pulaski Rd. Chicago, IL 60623 P:(630) 377-1188 F: (630) 377-7360

St. Charles- 2900 Foxfield Rd. Suite 102 St. Charles, IL 60179 P: (630) 377-1188 F: (630) 377-7360



Physical Therapy Protocol

****You will start PT immediately post op****

- 0-2 weeks
 - Exercises: Please practice making a fist and straightening out your fingers **at least 5x/day for 3-5 minutes per session**
 - No lifting >5 lbs for the first 2.5 weeks post op
 - Keep wound clean and dry, no soaking wound
 - Reduce swelling in hand and fingers by working on active finger flexion and extension. Can use opposite hand to passively flex the fingers into the palm if necessary. Repeat 5-6x/day
 - Shoulder range of motion in all directions
 - Elbow range of motion in all directions
 - Wrist range of motion after 3 days post-op
- 3-6 weeks
 - Compression glove if needed
 - Scar massage after sutures are removed at first post-op
 - Continue all finger, shoulder, elbow exercises. Continue progressive wrist range of motion to achieve full wrist motion by 6 weeks
 - Initiate gentle hand strengthening by squeezing rubber ball, silly putty or stress ball
 - No pushing off with operative hand, no vibrating tools, no repetitive overuse of operative hand
- 7-12 weeks
 - Maintain full ROM of wrist and fingers
 - Continue hand strengthening with squeeze ball or hand exercises
 - Begin wrist flexion curls and wrist extension curls
 - No pushing off with operative hand, no vibrating tools, no repetitive overuse of operative hand