

Discharge Instructions for Carpal Tunnel Surgery

Wound Care:

- Keep dressing on until your first postoperative appointment. The Coban dressing can tighten over time and depending on the amount of swelling you may have, it may become restricting. ***IF you feel the post op dressing is too tight***, please remove and cover the incision with clean, dry gauze. The longer you keep your post op dressing, the cleaner your wound will stay and the less chance of post-operative infection.
- Keep postoperative dressing dry.
- While showering place a large plastic bag over the arm and securely taped just below the shoulder. Keeping the hand elevated during the shower will prevent the bandages from getting wet.
- Do not submerge in water until sutures are removed at 2 weeks.
- Sutures will be removed during your first post-operative appointment (10-14 days after surgery)

Activity:

- Elevate the operative hand above your heart, fingers pointing up, continuously for 72 hours to help decrease post-operative swelling.
- To prevent swelling and stiffness make a full fist and fully straighten the fingers out 10 times an hour while awake.
- You may use the hand for light activities such as eating, dressing, and personal care.
- Avoid pushing / pulling / or lifting with the operative hand.
- Use the extremity as pain allows in the postoperative period. Obviously, overuse or exercise during this period will lead to increased discomfort and should be avoided.
- **NO DRIVING** while post-operative dressing is in place or while on narcotic pain medications

Medications:

- Please use narcotic medications (Norco, Percocet) sparingly and slowly try to decrease the amount and frequency over the next two weeks.
- If you feel the narcotic pain medication is too strong, you may use acetaminophen instead. Avoid taking ibuprofen since it has been shown to delay bone healing.
- If you choose to take anything other than what was prescribed, please consult the pharmacist to ensure that you are not overdosing on a certain class of medication which can lead to severe kidney/liver damage.
- One of the side effects of narcotics is constipation. Be sure you drink plenty of fluids, and take a fiber supplement such as methylcellulose (Citrucel) or psyllium (Metamucil) or a stool softener like docusate (Colace).
- Please continue all medications that you were taking prior to your surgery in addition to the medications prescribed for post-operative pain. If you have questions regarding those medications that you were on prior to surgery, please contact your primary care physician.

Diet:

Resume your normal diet when you feel well. If your stomach is upset, try bland, low-fat foods like plain toast, chicken broth, rice, and yogurt. Continue to drink plenty of fluids. Many people are constipated after surgery. This can be due to the pain medicine and a lack of activity. Be sure you get plenty of fluids and take a fiber supplement such as Citrucel or Metamucil or a stool softener like Colace.

Follow-up Appointments:

- Your first post-operative appointment will be in 10-14 days.
- If you do not have these appointments set up, please call the appointment line
- If there is an emergency and you are unable to reach anyone in the office, please go straight to the emergency room.
- Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

When to call for help:

Call 911 anytime you think you may need emergency care. For example, call if:

You pass out (lose consciousness).

You have severe trouble breathing.

You have sudden chest pain and shortness of breath, or you cough up blood.

You have severe nausea or vomiting.

Call the office if:

You have pain that does not go away after you take pain pills.

You have a fever over 100.4°F.

You have loose stitches, or your incision comes open.

Your incision keeps bleeding 3 days after your surgery.

You have signs of infection, such as redness around incision or pus draining from your incision.