Post Operative Instructions following Hand Surgery

Dressings

Your hand will be bandaged and splinted following your surgery. This dressing should stay intact until your follow-up appointment. These dressings are usually changed by the Hand Therapist, or by a nurse at my rooms or at one of the White Cross clinics. If you wish to take a shower, tape a bag over your bandage and hold it well above your head to prevent water dripping inside your dressing. You will only need dressings for the first two weeks or so until primary healing has occurred. I encourage you to wash your hand and clean the wound with antibacterial liquid soap under supervision of a nurse or therapist at your first dressing change. Your second dressing is usually much less bulky than the first and is often worn under a splint.

Stitches

On the palmar surface of the hand I use a dissolving suture which may be removed after a week/ten days or can be left to dissolve spontaneously after three-four weeks. On the back of the hand and along the forearm I use a combination of dissolving and non-dissolving sutures. I will advise if they need removing.

Wires

Occasionally K-wires are used to hold bones in position while they heal. If these wires are buried and need surgical removal, then this is done formally in a hospital. If the wires are exposed and protruding through the skin, they can be removed quite simply at one of the clinics.

Activity

I generally encourage gentle movements of the fingers within the splint until formal therapy can commence. Keep your hand in the sling for the first 72 hours to ensure elevation and optimise oedema control. Early movement is crucial to an optimal recovery and I will specify to you if you are to limit this mobilisation in any way. Early therapy following tenolysis (freeing of scar tissue around tendons) or arthrolysis (release of scar tissue around joints) is critical to your outcome. Ideally your appointment should be 3-5 days after your surgery. It is preferable to have this (and subsequent) appointments made well ahead of your surgery. When skin grafts are in place, my preference is to have one of the senior therapists or a nurse change the first dressing and to inspect the graft. Your hand will be splinted and dressed for a further week to allow stabilisation of the graft before formal mobilisation under the supervision of the therapist. Start to use your hand under the guidance of the hand therapists. Your level of disability following surgery will be determined by the degree of impairment prior to surgery and the complexity of the surgery undertaken to correct the problem. Your therapist can formulate a tailormade rehabilitation schedule to facilitate your return to optimal function of your hand.
**Driving**

It is generally considered unsafe to drive with a splint in place. You ability to drive safely will be determined by numerous factors relating your car and also your surgery. As a general rule, expect at least two weeks off driving.

**Pain**

Pain is not usually a feature following hand surgery. I use a lot of regional block techniques that can leave parts (or the whole) of the hand numb after surgery. This usually resolves fully overnight but not uncommonly can continue (in part or completely) for several days. I suggest you do take regular pain relief as discussed with the anaesthetist. We generally use a combination of an anti-inflammatory agent with other oral analgesia. Please advise of any health issues you may have (particularly gastritis or stomach ulcer) which can influence the safest and most effective analgesia prescription.

**Smoking:**

Cigarette smoking (even just one or two!) can affect your healing and rate of complications. We therefore strongly recommend that you do not smoke for one month after your surgery.

**Medication:**

Continue to use your medication as instructed.

**Aspirin:** If you are taking aspirin under your doctor’s orders (e.g. you have previously had a blood clot, stroke, heart attack, etc) it is preferable that you continue taking your aspirin. Otherwise you should avoid medicines containing aspirin for four weeks after surgery.

**Vitamin E:** You should avoid medicines containing vitamin E for four weeks after surgery.

**Alcohol:**

Do not drink any alcohol (beer, wine, spirits) for one week after surgery.

**Food and Fluids:**

You may be constipated so have light meals with plenty of fluids (preferably 6 - 8 glasses of water per day). Eat ample fresh fruit and vegetables. To reduce fluid retention, avoid salty foods.
Work

Your return to work will be largely determined by what you do with your hands at your place of work and the extent of the surgery undertaken. ACC may arrange a workplace assessment for you to assess the extent of your disability and also to see if there are any lighter duties you can undertake. Please liaise with your case manager directly regarding this.

ACC Paperwork

This is needed to give to your employer and ACC so the appropriate wage compensation can be granted. It is preferable to have this form filled ahead of time based around the proposed date of surgery and ideally this is done at your pre-op consultation. At the very least please ensure you have the ACC18 form filled before leaving the hospital. Your GP or primary care provider is able to complete any ACC documentation including dates of surgery and proposed return to work schedules. I am only a phone call away from your health provider should any further information be required.

Please have all your ACC details - ACC number, date of injury and site of injury available at any clinic appointments.

Your Follow-Up Schedule:

Your initial follow-up will be with the hand therapists who will attend to dressings and rehabilitate your hand. The first appointment with them is usually in the first week. I will check on your progress after the first six weeks following surgery to ensure that all is well and complete any final ACC paperwork. Sometimes your follow up will be at a White Cross Clinic. If you are attending a White Cross Clinic within the initial six weeks following surgery please make this known to the booking clerk explaining that you are a ‘Post-Op’ patient.

Please make follow-up appointments at the following clinics as marked, for change of dressing / fitting of cast / fitting of splint / removal of sutures:

<table>
<thead>
<tr>
<th>CLINIC</th>
<th>PHONE</th>
<th>WEEK</th>
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<tbody>
<tr>
<td>Handworks Therapy</td>
<td>529-7461</td>
<td></td>
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<tr>
<td>Hands On Rehab</td>
<td>486 1501</td>
<td></td>
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<tr>
<td>Hands Out West</td>
<td>838-6510</td>
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<tr>
<td>Ponsonby WHITE CROSS</td>
<td>376-5555</td>
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<tr>
<td>Baycare WHITE CROSS</td>
<td>521 8888</td>
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<tr>
<td>9 St Marks Rd</td>
<td>529 2029</td>
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<tr>
<td>Takapuna Hand Therapy</td>
<td>446 6239</td>
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<tr>
<td>Torbay Physiotherapy &amp; Hand Clinic</td>
<td>473 0333</td>
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<tr>
<td>Moving Hands</td>
<td>09 294 8004</td>
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Please call me immediately on 529 2029 or 021 327 464 (after hours) or contact your doctor or local emergency clinic in the event of:

- Increased pain/swelling/bruising
- Change of colour of any of your digits
- Bleeding/discharge/offensive odour
- Any sudden loss of movement in your hand