DR. COLIN MCINNES PLASTIC SURGERY

Hand/Nerve Surgery - Post-Operative Instructions

Apply pressure to the area for 5 minutes after surgery to decrease bruising. If you notice any bleeding at home (which occasionally happens as the freezing wears off), take a clean cloth and apply firm pressure to the area for 20 full minutes without removing the pressure. This resolves 95% of bleeding problems. If bleeding persists, try again for 30 minutes, and if still problematic call our office (during regular work hours, 8am-5pm), the plastic surgeon on-call (604-527-4925; for weekends or after hours), or visit your nearest emergency department. Keep the area elevated as much as possible over the next few days to decrease swelling. Icing the area can also be helpful, just don't get the dressing wet. If the dressing/tensor bandage feels too tight (which can happen with swelling), you can loosen it. You may shower after 24 hours but keep the surgical site dry (many patients report success with taping a bag over their hand). If you have been placed in a splint or cast, this will need to stay on full time unless directed differently by Dr. McInnes. Splints or casts should not get wet. You may be directed to remove your splint or cast if you see a hand therapist. No bathtubs, hot tubs, pools, lake water, well-water to the area until it has completely healed. All sutures used will be dissolving.

- Carpal tunnel release: dressing on for 3 days, then remove and apply band-aid + thin layer of polysporin
- Ulnar nerve release: dressing on for 3 days, then remove and apply band-aid + thin layer of polysporin
- Trigger finger release: remove the dressing the next day and apply band-aid + thin layer of polysporin *Carpal tunnel/ulnar nerve/trigger finger surgery > important to keep the fingers moving right away! This will greatly minimize stiffness which can be irreversible.
- Tendon repair: leave splint and follow strict instruction from Dr. McInnes and/or a hand therapist
- Finger fractures: keep the splint on until you see Dr. McInnes again
- *In general, these are not moved early as it risks tendon rupture or delayed fracture union.

RANGE OF MOTION

Please make an appointment with a hand therapist and present them with the note provided.
You do not need an appointment with a hand therapist, but you should move you hand to preserve/regain your range of motion. Increase this movement over the next several days.
FOLLOW UP Call my office within 2 days for a follow up appointment in days or weeks RCH Cast Clinic Office
You do not need a follow up appointment with my office unless you have a specific concern. Your sutures are dissolving. If they are still visible after 3 weeks, take a clean dry cloth after showering and gently rub the area. If they do not slough off, repeat this 1 week later.

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INFECTION / COMPLICATIONS

If you have any signs of infection (eg. increased pain after 2-3 days, increasing redness, shiny skin, purulence, fevers, red streaks up your arm), <u>call my office</u> for an appointment to see me. Do not delay! If you notice this afterhours, please go to your nearest emergency department. If you have an incision area where the skin comes apart, please call the office for a follow-up appointment. This is usually just treated with a thin layer of polysporin until it heals.

AFTER HOURS EMERGENCY CARE

If you are having a true emergency, please call 604-527-4925 and ask to speak with the plastic surgeon on call or visit your nearest emergency department.

SCAR MANAGEMENT

It takes a full year for a scar to mature. It will become red after surgery, and then typically starts to fade to white after ~6 months. If it gets too much sun while it is healing, it can turn permanently dark, so I recommend keeping the area out of the sun as much as possible. Techniques include sun-avoidance, long clothing, and applying sunscreen (SPF 30) even if it's cloudy. I typically recommend using a non-irritating lotion that contains sunscreen daily for the first 6-12 months.

After 3 weeks, assuming the incision is well healed, you may begin scar massage to the area to help soften the scar. I recommend using a lotion or cream that doesn't irritate your skin, and massaging it into the scar for 5 mintues, several times per day. I carry a medical-grade scar cream in my office, or you can purchase a regular scar cream elsewhere.

QUESTIONS

If you have any questions or concerns, please call the office.

PAIN MANAGEMENT

The freezing from your procedure will wear off in 2-3 hours, and you will start to notice some soreness afterwards. This is normally well controlled with over the counter medication. For adults without allergies to these medications, I usually recommend taking Tylenol and Advil together (on a full stomach). These don't interact with each other, have fewer side effects than narcotics, and are quite effective at the doses written below.

Recommended Pain Medications (assuming you don't have allergies or contraindications)

Tylenol (acetaminophen) Extra Strength: 2 tablets (1 gram total), every 4-6 hours as needed Advil (ibuprofen): 400-600mg, every 6 hours as needed

Advil (ibuprofen): 400-600mg, every 6 hours as needed
• These medications can usually be taken together as they do not interact.
<u>Date:</u>
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☐ Tramacet, 1-2 tabs PO q4h PRN x 25 tabs
□ Tylenol #3, 1-2 tabs PO q4h PRN x 25 tabs
□ Keflex 500 mg PO QID x 3 days
\square Other:

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