

Findling Surgical, P.C.

Fillip M. Findling D.O.

Surgery of the Hand, Wrist, & Elbow

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Hand Surgery Post Operative Instructions

DIET: Regular diet. Start light and progress as tolerated. No alcoholic beverages on the day of surgery.

ACTIVITY:

1. Keep hand/wrist above the level of your heart *at all times* for the next 7 days. This should be accomplished by using the **FOAM PILLOW**. A sling will not hold your hand/wrist above your heart and therefore is inadequate (it also may cause shoulder stiffness).
2. Attempt to move unsplinted fingers as much as possible (**UNLESS TENDON OR NERVE REPAIR PERFORMED**).
3. Avoid activities which may re-injure your hand or finger.
4. Move all joints of the extremity that are not immobilized (i.e. shoulder, elbow, fingers, and thumb unless instructed otherwise).

DRESSING/ WOUND:

1. Keep your dressing clean and **DRY**. Do not change your dressing.
2. You may shower tomorrow. Cover your bandage with a plastic bag and use tape or a rubber band so that it is water tight.
3. If plaster has been applied or a cast has been placed —do not make holes in it, remove it, or stick objects in it (i.e. coat hangers, pencils).
4. Use the **FOAM PILLOW** as much as possible to protect the operative site as well as keep it elevated

PAIN MEDICINE:

1. Take pain medicine on an **"AS NEEDED"** basis according to your doctor's instructions.
2. Your pain will decrease over the next few days-- allowing you to:
 - Decrease your pain medicine quantity until you stop.
 - Increase the time between doses until you stop.
3. You should not drink alcoholic beverages while on pain medication.
4. Take pain medicine with food to prevent nausea.
5. Constipation can occur. If no bowel movement occurs within 48 hours — take a laxative of your choice (over the counter).

CONTACT PHYSICIAN FOR:

Slight pain, swelling and bluish discoloration are to be expected. If you have breathing difficulty or chest pain dial 911 immediately. However, if the following symptoms occur notify your physician:

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|---------------------------------------------------------------------|----------------------------------|
| •Temperature above 101° F | •Inability to urinate in 8 hours |
| •Uncontrolled nausea/vomiting | •progressively increasing pain |
| •Signs of wound infection
(redness, swelling, pus-like drainage) | •Excessive bleeding |
| •Excessive swelling and tightness | •Increasing numbness |

OFFICE APPOINTMENT:

Call to schedule an appointment with your doctor in _____ days for a dressing change.

Patient Name _____ Signature _____ Date _____

Witness _____ Date _____