

**Brigham & Women's Hospital
Department of Orthopedic Surgery
Hand & Upper Extremity
Dr. George Dyer**

POSTOPERATIVE INSTRUCTIONS

Hand/Wrist/Elbow – soft dressing

Dressing Care

You should keep your dressing clean, dry, and intact. Use a plastic bag over the dressing to keep it dry in the shower.

After 5 days, you may remove the dressing and place a band-aid over the incision(s). After 5 days, you may get the incision wet in the shower, but do not scrub it. No soaks, hot tubs, pools, baths, or soiled water until cleared by your doctor. DO NOT apply creams or ointments of any kind to the surgical site.

If you have sutures or staples in place, they will be removed at your post operative appointment with Dr. Dyer or Mallory Pingeton, PA-C at 7-14 days after your surgery. If you have steri-strips in place, they will fall off on their own. Do not remove them. No baths, soaks, pools, hot tubs, pond/lake/ocean or soiled water unless cleared by Dr. Dyer's office.

If there is any concern for a wound infection, contact your surgeon immediately. Do not start taking antibiotics without consulting Dr. Dyer's office.

Activity and Weight Bearing Status

Sling Use: If you had a nerve block and your arm was put to sleep for surgery, you should wear your sling until feeling/use in your arm has returned. Otherwise, the sling is for comfort only.

Elevation: It is important to keep your operative hand elevated with fingers pointed up (not across) for several days to help decrease swelling. This will also help with pain control.

Motion: Open and close your fist 10 times/hour. You can and should move your fingers/wrist/elbow that are not in the dressing/splint.

Weight: You may use your hand and fingers for light activities, but no lifting, pushing, pulling with affected arm/hand.

Activity: Increase your daily activity as you feel comfortable. You may feel weak and tired immediately post-op, but each day you will become stronger. It is normal to have pain after surgery and feel pain after activity. If you start feeling increased pain during an activity, stop and rest. Use your body as your guide.

Driving: In the post op period, you may drive when you no longer are taking opioids for pain, and feel safe to drive with full use of both arms and hands.

Medications

Continue your regular medications unless instructed otherwise.

It is normal to feel pain after surgery. You do not need to take pain medication. For minor pain you may take acetaminophen (Tylenol). You may also take anti-inflammatory medications such as ibuprofen (Advil, Motrin) and naprosyn (Aleve) as needed for pain unless otherwise directed by your doctor(s). Take prescribed opioids (typically *Oxycodone* or *Dilaudid*) only as needed for severe pain. Medications such as Tylenol #3, Vicodin, and Percocet contain acetaminophen (Tylenol). Do not exceed greater than 3,000 mg of acetaminophen (Tylenol) in a 24-hour time period.

As your pain level decreases, you should gradually reduce the number of pills that you take and increase the time between doses in order to wean off of the opioids as tolerated. Avoid operating heavy machinery, driving, and drinking alcohol while taking opioid pain medication.

Please see last page of instructions for more information regarding opioid use.

When to Call the Doctor

- * Significant increased pain of the arm/hand/fingers after 2-3 days
- * Temperature >101 degrees for 24 hrs
- * Excessive bleeding through your dressing
- * Your dressing is soiled or wet
- * Numbness from nerve block lasting >48hours after surgery

Questions & Concerns

Monday-Friday, 9am-5pm, call Dr. Dyer's office: 617-732-6607

All other times, call 617-732-5500 and ask to speak with the orthopedic resident-on-call

Patient Gateway: Dr. Dyer's office uses the MGB Patient Gateway as a supplemental means of communication for non-urgent issues. Messages sent to Dr. Dyer are managed by our team. In order to meet your needs in a timely manner, all time sensitive questions or requests requiring a response within 72hrs should be called into the office at 617-732-6607. Please call for any requests for appointments or time changes.

Post-Operative Appointment

You need to be seen for a post-operative appointment approximately 10 days after surgery. A virtual post op visit may be an option for you depending on your procedure and availability/timing.

Most postoperative appointments are with Mallory Pingeton, PA-C, unless otherwise requested. If you do not already have an appointment, please call to schedule one.

Dr. Dyer's office: 617-732-6607

OPIOID INFORMATION

Examples of opioid (narcotic) medications we use to combat post operative pain: Oxycodone, Percocet, Vicodin, Norco, Dilaudid.

BWH Orthopedic Hand & Upper Extremity Opioid Policy

Our hand division has a policy in place predetermining the number of pills you will receive for your anticipated pain after your scheduled procedure. We do not use long-acting opioids or treat chronic pain with opioids. We will not provide opioid medication after 4 weeks post operatively. We are required to check statewide databases prior to prescribing opioids. Patients with more pain than expected may need to be evaluated in the office. Most patients only require one initial prescription and any refill will be determined on an individual basis. If you think you may run out of medication over the weekend and need a refill, please call the office by 12pm on Thursday for a phone triage pain assessment.

Chronic Pain

Patients already on daily opioids, methadone, or suboxone before surgery will only receive one post operative opioid prescription for use in immediate post operative period; before your procedure, you will need to make prior arrangements with your primary opioid prescriber for your continued post operative pain management plan.

Safe Use of Opioids

Take opioids only as prescribed. Never take more than instructed, even if you feel your pain is not well managed. Improper use of opioids is a leading cause of accidental death. Do not combine opioids with alcohol, medicines used to calm anxiety, or other medications that cause sleepiness or sedation. There is a chance of becoming addicted to this medication. If you have a personal or family history of addiction, this risk is higher. It is important to share this information with your prescriber in order to keep you safe. Opioid medications can impair your ability to drive or operate other types of machinery safely and you should not drive while taking this medication.

Common Side Effects of Opioids

Opioids can cause constipation. Eat foods high in fiber such as fruits and vegetables and increase fluid intake. You should take a stimulant laxative (i.e. senna) and/or stool softener (i.e. colace) while taking opioids; you can get these medications without a prescription. If you begin to experience loose stools or diarrhea, stop these medications.

Opioids can also cause allergic reactions, sedation, and respiratory depression (decreased drive to breathe). They also can cause adverse affects such as nausea, vomiting, urinary problems, and itching. Contact your prescriber if you develop these or other symptoms that concern you.

Partial Fill of Your Prescription

When filling your prescription, you may choose to receive fewer pills than prescribed from the pharmacy. If you choose this option, you will not be able to receive the remainder of the prescribed pills at a later date.

Safe Storage & Disposal

Your medications are prescribed for only you. Do not share your medication with friends or family members. Opioid medications must be stored properly, out of the reach of children or others who may be at risk of ingesting them. Keep opioid medications locked in a safe or lock box. Unused medication should be removed from the household as soon as possible through a DEA-sponsored drug take-back program. You can find a disposal site near you

at: <https://www.deadiversion.usdoj.gov/pubdispsearch>. If a program is not available, then the FDA recommends flushing unused opioid medication down the toilet to prevent exposure and harm to others. See FDA website for medicines recommended for disposal by flushing. <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm101653.htm>

For information on the Massachusetts Opioid Epidemic:

<http://www.mass.gov/chapter55>

For information on the Brigham & Women's Faulkner Hospital Addiction Recovery Program:

<https://www.brighamandwomensfaulkner.org/programs-and-services/addiction-recovery-program/default>