



Postoperative Instructions

Open Surgery Of The Hand

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Diagnosis: _____

Procedure Performed: _____

1. A pain script was provided in the office prior to your surgery. Please use it for postoperative pain management as directed on the script.
2. You are permitted to eat. Please begin with clear fluids and advance your diet as tolerated.
3. Ice should be applied to your elbow 24 hours a day for the first 72 hours. After 72 hours, apply ice for 1 hour per day or whenever you experience pain. Do not use heat.
4. Elevate your elbow as often as possible. This will decrease swelling and pain.
5. Please **DO NOT** remove your dressing or splint. This will be done on your first postoperative office visit.
 - A splint has been applied. You will not be able to move your wrist or hand.
 - A sling has been provided for your comfort.
6. Please **DO NOT** get your dressing or splint wet. Should this occur, please call our office to have the dressing / splint changed.
7. Some amount of swelling may be present postoperatively. This is normal and should subside over several days.
8. Activity
 - a. Please exercise your fingers to decrease swelling.
 - b. Apply ice and elevate to decrease pain and swelling.
 - c. Please **DO NOT** use exercise machines or lift anything with your surgically repaired extremity. You may write and type.
 - d. Please remain ambulatory and get out of bed and walk around the house at least 3 times per day.
 - e. No driving until after you are seen in the office after surgery.
9. Elevated temperatures or a mild fever (temperature slightly greater than 102 degrees) can be expected within the first 48 hours after surgery. Please Take Ibuprofen to decrease your temperature. After 48 hours from surgery any temperatures over 101 degrees, increased redness of the surgical site, or progressive swelling should be immediately brought to the attention of my staff.
10. Please contact our office to make or confirm your follow-up appointment for 5-7 days after surgery. This appointment is normally scheduled at the time you signed up for surgery. Please check your surgery packet for the location / date / time.
11. Thank you for following the above instructions. If you have any questions please do not hesitate to call my office. My staff and I will be available to address your concerns **(412) 661-5500**.