

Discharge Instructions

Reasons to Call the Office

Carpal Tunnel Release



ADAM.

- Fever greater than 101 F
- If you have increased swelling or redness at incision
- If you have drainage at your incision
- If you develop chest pain, or shortness of breath
- If you have calf pain/leg pain or swelling
- Increased pain not relieved with medications

Please have your pharmacy fax our office at 972-535-2180 for all medication refills.

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Neurosurgery

- *Keep arm elevated for 72 hours after surgery.*
- *Keep the dressing on for 72 hours after surgery. On the third day after surgery, the dressing may be removed.*
- *After the dressing is removed you may leave your incision open to air.*
- *You may clean your incision with hydrogen peroxide.*
- *You will be given narcotic pain medication for severe pain. You may take Tylenol for minor pain.*
- *You must keep your sutures dry. Do not immerse your sutures in water or get them wet.*
- *You will follow up in 10-14 days after your surgery for suture removal. ½ of your sutures will be removed at that time, the remaining sutures will be removed one week later.*
- *You may begin hand therapy once all sutures have been removed.*

Why the Procedure is Performed

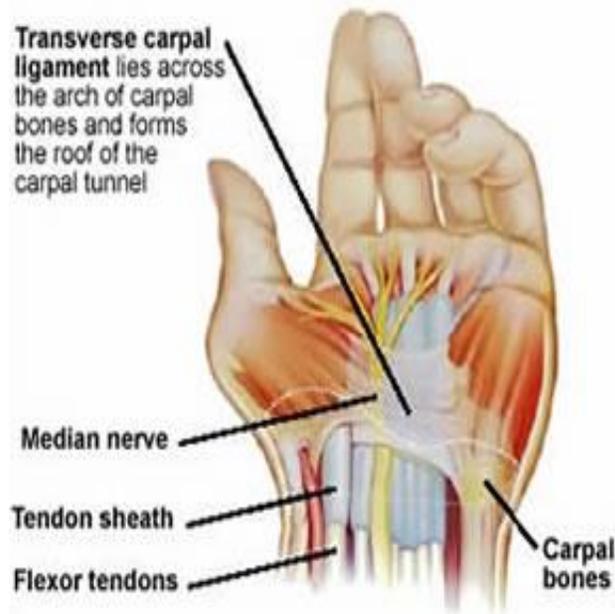
Patients with symptoms of carpal tunnel syndrome usually try non-surgical treatments first. These are:

- Anti-inflammatory medicines
- Occupational therapy
- Workplace changes to improve your seating and how you use equipment
- Wrist splints
- Shots of corticosteroid medicine into the carpal tunnel

If none of these treatments help, some surgeons will test the electrical activity of the median nerve with an EMG. If the test shows that the problem is carpal tunnel syndrome, carpal tunnel release surgery may be recommended.

If the muscles in the hand and wrist are getting smaller because the nerve is being pinched, surgery will usually be suggested.

Carpal Tunnel Release



In carpal tunnel release, the surgeon will cut through the carpal ligament to make more space for the nerve and tendons.

- First your surgeon will make a small surgical cut in the palm of your hand near your wrist.
- Then your surgeon will cut the carpal transverse ligament to ease the pressure on the median nerve. Sometimes, tissue around the nerve is removed as well.
- Your surgeon will then close the skin and tissue underneath with sutures (stitches).

Postoperative Care

Patients are discharged home after the procedure. The pain and numbness may go away right after surgery or may take several months to subside. Try to avoid heavy use of your hand for up to 3 months.

When you return to work depends on whether the dominant hand (the hand you use most) was involved, on your work activities, and on the effort that you put into rehabilitative physical therapy.

If you have surgery on your non-dominant hand and do not do repetitive, high-risk activities at work, you may return to work within 1 to 2 days, although 7 to 14 days is most common.

If you have surgery on your dominant hand and do repetitive activities at work, you may require 6 to 12 weeks for a full recovery before you can return to previous work duties. Physical therapy may speed your recovery.

The length of your recovery will depend on how long you had symptoms before surgery and how badly damaged your median nerve is. If you had symptoms for a long time, you may not be completely free of symptoms after you recover.