

Dr. Biswas' Instructions following Upper Extremity Fracture Surgery

Dressing and Wound Care

- A metal plate with screws or pins (hardware) is often used to stabilize a fracture. They keep the bones in place while they heal.
- Sometimes, pins or wires will be used.
- After surgery, you will be in a bulky dressing (bandage) with a plaster splint with the fingers free.
- The splint is similar to a cast. The splint cannot be removed and must be kept dry.
- When showering or bathing, cover the splint and your hand with a plastic bag to keep everything dry. The splint protects the incision and the surgical repair, as well as lessen swelling.
- Elevate your hand above your heart as much as possible to lessen swelling and pain. Pillows and blankets under the arm are helpful when you go to sleep.

Pain Management

- Surgery to repair a fracture can be painful. You will receive a prescription for narcotic pain medicine. For the first 2-3 days, take the pain medication around the clock to stay on top of the pain control.
- After 3 days, take the medicine only if you need it. If your pain is mild, you make take Tylenol (acetaminophen) instead.
- It is important to know that even with pain medication, you can still experience some pain.
- Be sure to talk with us about how to take your pain medication. Taking the correct dose at the right time is very important.
- If you have uncomfortable side effects from the pain medicine, please call our office at the number listed above.

Driving

- Do not drive if you are taking narcotic pain medication. It is not safe. The medicine can make you drowsy and delay your reaction
- Once you are no longer taking the medicine, you may drive as soon as you can comfortably grip the steering wheel with both hands. It is generally best to avoid long drives until the initial dressing and plaster splint is removed.

Activity

- Move your fingers to help prevent stiffness. Try to bend (make a fist) and straighten your fingers 5 to 6 times a day.
- Do not lift anything heavier than a cup of coffee or full soda can (about 1 - 2 lbs) until sutures have been removed.
- You can use your hand for very light activities of daily living, such as eating, writing, typing, getting dressed, and brushing your teeth. However, pain and stiffness may make it hard to do these things for 2 - 4 weeks.

Follow-Up Plan

- When you leave the surgery center, you should have a follow – up already 10-14 days after surgery. Your dressing and sutures will be removed. At this visit, you will be placed into a removable brace or a full cast (if a complex injury) for the next 4 weeks.
- You will be referred to a hand therapist in our clinic to start range of motion exercises for your elbow, wrist, and fingers as well as exercises to decrease swelling and scarring. You will see a therapist once per week for 4 weeks. You may be referred to a therapist closer to your home for future visits if that is more convenient for you.
- You will have an appointment for repeat X-rays 6 weeks after surgery. At this point, if X-rays show adequate healing, we will start you on a more vigorous therapy program. We recommend therapy visits 2-3 times per week at this time for 4-6 weeks.
- Do not do any weight-lifting or strengthening exercises without talking with your surgeon or occupational therapist.