

Early Post Operative Care

Once you have been discharged from hospital following surgery, it is time to rest and start recovering. This page gives some advice that can make the first week or so after surgery a little easier and start your recovery on the right track.

Pain Relief

Some pain after surgery is normal and unavoidable, that said, these days we have a number of ways of ensuring that post-operative pain is manageable. You may have had a nerve block placed by the anaesthetist or some local anaesthetic put in around the site of your surgery. This is very effective in the first 6-12 hours following surgery but as it wears off it is important start to take some analgesia so that you don't get a shock when the block wears off completely.

Depending on your procedure, you will be given a prescription for analgesia to take once you are home. **Simple analgesia** like paracetamol and anti-inflammatories are often enough to manage pain after minor procedures, but even after more extensive surgery, these will help to manage your pain and significantly reduce the amount of stronger pain-killers required.

Stronger analgesia usually involves the use of opioid medications such as Oxycodone (Endone) or some of the newer agents like Tramadol (Tramal) or Tapentadol (Palexia). These medications are very effective at controlling pain but can have side effects such as nausea, vomiting, constipation, confusion and sleepiness. Every patient is different but it is important to try to minimise the use of these medications to limit side effects but also to reduce problems with tolerance (opioids lose their effectiveness the more that you use them).

If your pain is not adequately managed post-operatively or if you are experiencing significant side effects please contact our hospital (24/7) and one of our experienced nurses will be able to discuss this with you or get in touch with Dr Alexander immediately.

Swelling Control

Keeping swelling to a minimum post-operatively is important to optimise wound healing, reduce pain and start regaining mobility. Rest and elevation of the affected arm are the most important things you can do to minimise swelling.

Resting your arm or hand can be difficult as we instinctively use our upper limbs for almost all of our day-to-day activities. It is important to be as prepared as possible so that when you are recovering from surgery, you do not put yourself in a position where you have to use your arm. Some practical tips include:

- Take a minimum of one week off work, preferably two, even if you have a desk or office job.
- Make sure you have family or friends around who are willing to help with tasks around the house.
- Consider organising a short-term meal delivery service or house cleaning assistance.

Elevation is another simple measure that will have a dramatic effect on post-operative swelling. Following hand, wrist or even elbow procedures, the easiest and most effective method of elevation is to rest your hand on a few pillows or cushions either next to you or on your lap if sitting or over your chest if lying down. Using a sling while you are out and about can also be helpful. Elevation after shoulder procedures is not as relevant although resting the arm in a sling as directed by Dr Alexander or your physiotherapist is important (see below).

Use of a sling

Following most shoulder procedures and certain elbow procedures you will be given a sling to rest and immobilise your arm. One of our physiotherapists will fit this for you during your hospital stay and you will also be instructed on how to put on and take off your sling properly and safely.

Compliance with the use of a sling after surgery is critical. Early rehabilitation is a careful balance of protecting whatever repairs or reconstructions have been performed and keeping joints mobile to prevent stiffness. Your physio will guide you through this process, monitor your progress and fine-tune your rehabilitation program as required to ensure you get the best result following surgery.

Whether or not you wear your sling overnight is a difficult question. In an ideal world you should prevent involuntary and potentially unsafe arm movements while you are asleep. If you are unable to sleep with the sling in place, keeping your arm on the inside of a t-shirt (i.e. not through the sleeve) is one way of keeping your arm relatively immobile. Another practical tip for sleeping with a sling is to rest your elbow on a couple of pillows next to your body so that your arm does not fall behind your body. Many patients even find that sleeping in a recliner chair is the most comfortable option in the short term.

Casts, backslabs and splints

After certain hand, wrist or even elbow procedures, your arm will be placed in a temporary plaster splint (backslab). This is to give your arm a chance rest in a position that is comfortable and unlikely to cause stiffness. If your arm requires longer-term support, this plaster backslab will usually be replaced with a custom, thermoplastic splint often within 3-5 days of surgery by a hand therapist.

While you have a plaster backslab on, it is important to keep your slab and bandages dry. Nursing staff on the ward or in the day surgery unit will show you some tricks to do this. If your plaster does inadvertently get wet, please contact us so that we can organise a review or earlier conversion to a removable thermoplastic splint.

By the time you are fitted with your custom splint, the majority of post-operative swelling should have resolved, meaning that this splint should fit perfectly for the remainder of your rehabilitation. That said, should you find your splint uncomfortable or loose, you should contact your therapist as this can often be adjusted very easily.

At the time your splint is fitted, your therapist will explain how to use your splint properly – when to take it off, how to put it back on, and what exercises you can be doing post-operatively. We find that the better **patients understand their condition and rehabilitation**, the better the results that can be achieved. It is important therefore to ask your therapist or Dr Alexander if at any point you are unsure of what you should and should not be doing as part of your rehabilitation.

Dressings

When you are discharged from hospital you will have dressings applied to any surgical wounds. Dr Alexander chooses very specific post-operative dressings to optimise wound healing as well as maintain mobility and visibility of the surgical site. These dressings are designed to be **left intact** and undisturbed until your post-operative review.

Should you, your therapist or your GP have any concerns about your dressing or wound prior to your first post-operative review please [contact Dr Alexander](#) immediately (even after hours). In particular, please do not start any antibiotics without first contacting Dr Alexander – these can make the diagnosis of post-operative infection particularly difficult.

We are dedicated to supporting you through every part of your recovery and will always be happy to discuss any concerns over the phone or schedule an urgent review if required.

Follow Up

Your follow up appointments (with Dr Alexander and also with your therapist) will usually be booked even before you surgery is performed and these will be confirmed with you when you are discharged. Sometimes, for patients from regional areas, we will plan simple post-operative follow up with your local GP to avoid unnecessary travel. If you are unsure of your follow up arrangements or if you can't attend on of your appointments for whatever reason, please [contact us](#) and we will be able to help.