



Proximal Row Carpectomy

Patient Postoperative Instructions

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0-2 weeks

Pain medication:

- Use your prescription pain medication as needed to control pain.
- If your arm was numbed (blocked) for the surgery by the anesthesiologist, begin taking pain medication before the block wears off.
- Do not drive or operate machinery while taking narcotic/opioid pain medication.
- Unless you cannot take them for other medical reasons, it is ok to use over-the-counter anti-inflammatory medication (e.g. Advil or Aleve) in addition to your prescription pain medication. Do not take tylenol as your prescription already contains this medication.

Post-op Dressings:

- Keep the dressings and splint in place until your first postoperative visit.
- Elevation of the hand, along with ice on-and-off for 20 minutes at a time, will help with swelling and pain.
- It is ok to shower, but the dressings must stay clean and dry. Place a waterproof covering over the dressings while bathing or showering (such as a heavy plastic bag that is sealed with Saran wrap).
- If the dressings get dirty, wet, or come apart please contact the office to have the dressing re-done.

Motion:

- Start moving your fingers and thumb that are not in the splint as soon as possible.
- Gently work on moving your palm up (supination) and palm down (pronation), along with flexing and extending your elbow.
- You can use your hand for light activity, such as eating, drinking, or using a computer.
- Do not lift, carry, push, or pull anything heavier than a glass of water or can of soda.

2-6 weeks (First post-op visit)

Splint:

- The postoperative splint and sutures will be removed at your 2-week visit.
- You will be placed in to a removable wrist splint by hand therapy at your first postoperative visit.
- Your splint should be worn whenever you are not performing therapy or wrist range of motion exercises.
- You can begin gentle scar massage at 3 weeks after surgery.

Motion:

- Therapy will be started for finger motion exercises, and wrist/forearm motion will begin at 4 weeks.
- Continue to avoid lifting, carrying, pushing, or pulling anything heavier than a glass of water.

6 -10 weeks (Second post-op visit)

Splint:

-Begin to wean from the splint at 6-8 weeks.

Motion:

- Continue finger, forearm, wrist, and elbow range of motion.
- Begin gentle finger and forearm strengthening.
- You can lift/carry up to 5lbs (about 1/2 gallon of milk) as your symptoms allow at 8 weeks.
- You can lift/carry up to 10-15 lbs starting at 10 weeks as your symptoms allow.
- Transition to a home exercise program.

10-12 weeks (Third post-op visit)

Splint:

-No longer necessary.

Motion:

- Continue finger and forearm strengthening.
- You can lift and carry to tolerance.
- No activity restrictions after 10 weeks.

12+ weeks (Third post-op visit)

If needed, therapy can be continued to focus on further strengthening or work conditioning. There are no lifting/carrying or other activity restrictions after 12 weeks, unless otherwise discussed on a case-by-case basis.