

Michael S. Bogard, DO
ORTHOPAEDIC SURGEON
Sports Medicine Specialist

POSTOPERATIVE INSTRUCTIONS
Hook of the Hamate Excision

** Please note that the instructions provided below are general guidelines to be followed; however, any written or verbal instructions provided by Dr. Bogard or his staff supersede the instructions below and should be followed.

PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION IF NECESSARY - DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE SURGERY CENTER OR VIA PHONE/EMAIL TO DR. BOGARD'S STAFF AFTER ARRIVING HOME

DIET

- Begin with clear liquids and light foods (jellos, soups, etc.).
- Progress to your normal diet if you are not nauseated.

WOUND CARE

- Maintain your operative dressing
- It is normal for the forearm to bleed and swell following surgery. If blood soaks onto the ACE bandage, do not become alarmed, reinforce with additional dressing.
- To avoid infection, keep surgical incisions clean and dry for the first 7 days following surgery – you may shower by placing a large plastic bag over your forearm beginning the day after surgery.
- DO NOT place the operative arm under water (i.e. bath or pool).
- Wait until your 1st post-operative appointment to have Dr. Bogard's team remove the surgical dressing.
- Please DO NOT place any ointments, lotions or creams directly over the incisions.
- Once the sutures are removed at least 7-10 days post operatively, you can begin to get the incision wet in the shower (water and soap lightly run over the incision and pat dry).
- DO NOT place the incisions under water (bath, pool) until given approval by Dr. Bogard

MEDICATIONS

- Local anesthetics are injected into the wound at the time of surgery. This will wear off within 8-12 hours and it is not uncommon for patients to encounter more pain on the first or second day after surgery when swelling peaks.
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle.
- Common side effects of the pain medication are nausea, drowsiness, and constipation. To decrease the side effects, take the medication with food. If constipation occurs, consider taking an over-the-counter laxative and be sure to drink plenty of water.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medications changed.
- Do not drive a car or operate machinery while taking narcotic medication.
- Please avoid alcohol use while taking narcotic pain medication.

Michael S. Bogard, DO

ORTHOPAEDIC SURGEON

— Sports Medicine Specialist —

- If you are having pain that is not being controlled by the pain medication prescribed, you may take an over-the-counter anti-inflammatory medication such as ibuprofen or naproxen in between doses of pain medication. This will help to decrease pain and decrease the amount of narcotic medication required. Please take as directed on the bottle.

ACTIVITY

- Non-weight bearing to the operative arm
- Range of motion to the elbow and fingers are encouraged
- Wear the sling for comfort, ok to come out of sling for elbow range of exercises
- Elevate the operative arm to chest level whenever possible to decrease swelling.
- Do NOT lift anything with the operative arm until advised by Dr. Bogard
- Do NOT drive while taking pain medication and until instructed by Dr. Bogard.
 - Typically return to driving after 2 weeks
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable.

SPLINT/BRACE

- Keep the post operative splint in place until seen at the initial post operative visit.
- You will be provided with a removable brace at your post operative visit and will be instructed on its use

ICE THERAPY

- Icing is very important in the initial postoperative period and should begin immediately after surgery.
- You may ice over the bandage/splint that you are placed in during surgery
- Care should be taken with icing to avoid frostbite to the skin.

EXERCISE

- Elbow and hand ROM are encouraged immediately after surgery
- Do NOT lift any objects with the operative extremity until advised by Dr. Bogard
- Physical therapy will begin around 2 weeks after surgery once cleared by Dr. Bogard

EMERGENCIES

- Contact Dr. Bogard's office at 858-524-7000 if any of the following are present:
 - Painful swelling or numbness (note that some swelling and numbness is normal)
 - Unrelenting pain
 - Fever (over 101° - it is normal to have a low-grade fever or chills for the 1st day or following surgery)
 - Redness and significant tenderness around incisions
 - Persistent color change in foot or ankle
 - Continuous drainage or bleeding from incision (a small amount of drainage is expected)
 - Difficulty breathing
 - Excessive nausea/vomiting
 - Calf pain
- If you have an emergency after office hours or on the weekend, contact the office at 858-524-7000 and you will be connected to our pager service.

Michael S. Bogard, DO

ORTHOPAEDIC SURGEON

— Sports Medicine Specialist —

- If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

FOLLOW-UP CARE/QUESTIONS

- If you do not already have a post-operative appointment scheduled, please contact our scheduler at 858-524-7000 to schedule.
- Typically the 1st post-operative appointment following surgery is 10-14 days following surgery
- Your 1st post-operative appointment will be scheduled with Dr. Bogard, he will do a wound check, go over therapy protocols and answer any questions you may have about the procedure.
- If you have any further questions please contact 858-524-7000