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Frequently Asked Questions:

FOR THE POST-OPERATIVE PATIENT

How much pain will I have after surgery?

There is no easy way to determine how much pain you will experience following your surgery, as pain tolerance is unique to individuals. However, there are several ways your post-operative pain may be managed, including narcotic pain medication, local and regional pain blockade (administered by the anesthesiologist or surgeon during your surgery), and therapeutic modalities such as icing, elevation of the surgical site, and activity modification.

What are the risks of surgery?

The risks of surgery can vary depending on the procedure performed. You and your surgeon may have to discuss specific risks associated with your particular surgery. Generally, the risks of surgery include bleeding at the surgical site, damage to nerves of blood vessels, and infection. Standard pre-operative protocols include antibiotic prophylaxis (usually administered through your IV prior to surgery) to help lower the chances of an infection greatly. While there will be some minor amount of bleeding at the surgical site following surgery, special measures are used during surgery to limit bleeding such as pneumatic tourniquets, electrocautery, the administration of hemostatic and/or vasoregulatory medications (e.g. epinephrine) to constrict blood vessels, and vessel ligation (tying off bleeding vessels). Of course, great care and special attention are given to protecting vital nerve and vessel structures throughout the surgical operation to avoid any unnecessary damage.

Should I be worried about a post-operative infection?

Infection is always a concern during the post-operative period. However, post-operative infections are quite rare (typically less than 1% of cases). The standard of care is to administer intravenous antibiotics prior to making any incision of the skin. This prophylactic dosing of antibiotics before surgery has helped to dramatically reduce post-operative infections rates.

If a post-operative infection does occur, it is usually superficial (at or around the skin incision site) and is typically well-treated with a five to ten day course of oral antibiotic medication such as Keflex. Very rarely does an infection require hospitalization and/or IV antibiotic administration.

You can help further reduce the chances of post-operative infection by keeping your wound(s) *clean* and *dry* until you are instructed to do otherwise by your surgeon.

Will I be able to drive after surgery?

There are many stipulations when it comes to driving after surgery. First and foremost, driving under the influence of prescribed narcotic medication is prohibited by California Department of Transportation laws. It is possible to receive citations and/or significant penalties, including fines, revocation of driver license, and incarceration for DUI infractions. Secondly, it is unlawful to operate a motor vehicle within 24 hours of administration of anesthesia (i.e. 24 hours after your surgery). Lastly, if your surgery results in immobilization of an extremity, such as a splint or cast, which hinders your ability to operate a vehicle safely, it is unlawful to drive. Ultimately, it is the responsibility of the driver to ensure that he/she is in control of the vehicle at all times and to be able to demonstrate that is so, if stopped by the police.

For more information about regulations pertaining to driving after surgery, please visit the California DMV website at <http://www.dmv.ca.gov/portal/home/dmv.htm>

What do I do about bathing or showering after surgery?

It is very important to keep your incisions clean and dry until the sutures are removed. This facilitates wound(s) healing and helps prevent post-operative infection at the surgical site. There are a variety of ways to keep your wound(s) dry: bathing instead of showering may help keep the surgery site out of the water; wrapping the affected extremity in a plastic bag with waterproof tape usually works well; purchasing a self-sealing waterproof shower bag from your local pharmacy is also very effective and convenient. Or, create your own method for keeping your wound(s) dry.

When can I go back to work?

Most patients are able to return to work quickly following most outpatient surgeries. There are, however, recommendations for those patients whose work is quite strenuous or involves being in harsh conditions or unsanitary environments, or whose surgery is quite extensive. For example, most patients may return to their regular work within two to three weeks (the time it takes small surgical wounds to heal) following a simple procedure such as a carpal tunnel release. Other procedures, such as major shoulder surgery may require several weeks to several months off work depending on

the functional requirements of one's job. If you perform strenuous labor involving your upper extremities, you may need three to six months off work after extensive surgery. Or, if your job requires minimal strenuous activity, you may be able to return to work within ten days to three weeks.

If it is recommended by your surgeon to remain off work for an extended period of time, we are pleased to assist you with any state or supplemental employment disability claims.