

Having cared for thousands of hand surgery patients in the last 25+ years (as well as receiving two hand surgeries myself), I can attest to the value of reviewing the following information prior to your hand or upper extremity surgery. It's a two-hands-needed world for most of us, so the next few pages are for everyone, regardless of whether you are right-handed, left-handed, or blessed to be ambidextrous (both-handed).

We look forward to *caring for the hands that care for you*, and trust that you will be satisfied enough to recommend our *helping hands* to your friends and family.

– Dr. Paul Gorman and staff

## Surgical Risks and Benefits

- Informed surgical consent is a **process**, not a piece of signed paper – **take as long as you need to decide if surgery is right for you!**
- Elective, non-emergency surgery is usually the **last** treatment option.
- There is no such thing as a **routine** surgery.
- There is no such thing as **risk-free** surgery.
- I do not perform experimental surgeries with unknown benefits and risks. You can be assured that the procedure planned would not be offered as an option at this time if I did not think it would help you. Because of my orthopaedic sub-specialization, many of the procedures that I do may not have been discussed with you as surgical options by other physicians and general orthopaedic colleagues.
- No "*completely perfect*" surgery exists – and sometimes the "*best*" surgical option just represents the treatment with the most benefits vs. risks. Thus, your expectations of surgery must be realistic, and I openly solicit all of your questions and comments about your pending surgery to help you best understand the specific benefits and risks of your procedures.
- Known common risks inherent to hand and upper extremity surgery include, but are not limited to:  
 Infection, bleeding, scarring and digital/wrist stiffness, incision healing problems, swelling that causes too tight dressings/splints/casts, adverse reactions (sometimes severe or even fatal) to medications and anesthesia, and inadvertent intra-operative injury to skin, vessels, muscles/tendons, nerves, other digits, etc. For bone and joint procedures, implants may fail and/or have to be removed in the future, and these tissues may heal unpredictably; slower than normal, or not at all.  
 Complications and/or adverse outcomes can happen to anyone, at any time, with any procedure; conversely, many times outcomes are much better than anticipated. *You and I do not have complete and ultimate control of a successful surgical outcome!* The complexity of the human body coupled with divinely-given individuality makes treating, and much more, operating upon, you an art and a science. Thus, we focus more on the *patient* with a problem than simply the problem a patient has.
- Things that you can do to minimize complications related to your pending procedures are:  
 Inform us of any known medication allergies or past personal or familial problems with anesthesia.  
 Inform us of all prescription and over-the-counter medications, herbs, vitamin supplements that you are taking – especially diet drugs like Phentermine; also, aspirin, ibuprofen, Coumadin, Plavix, and other "blood thinners."  
 Take all medications that we prescribe as ordered, and call us immediately with any medication problems and/or questions.

## BEFORE Surgery

- There's usually no convenient time for surgery – just less inconvenient times. Since you may need the help of others immediately before and after surgery, check with them before choosing a surgery time.
- Start practicing one-handed tasks or activities without the involved finger or hand – dressing, bathing, toileting, light housework, cooking, starting the car, driving short distances, and your other daily routine, non-strenuous activities; get used to the less-than-usually needed dexterity and/or hand-eye coordination. If you are going to bathe without help, plan on getting a long-handled back brush, liquid soap, non-slip bath mats, shower stool, lighter/smaller more easily-handled towels, etc.
- If you will have a post-op brace or splint, start doing many of your normal daily activities with it on your

## BEFORE Surgery

wrist/hand.

- Men: consider getting a haircut – shorter hair is easier to care for; Ladies: also consider a trim or cut, and remember that some hair styles are more easily managed as well; Both: clip all fingernails and get major shopping, house cleaning, yard work, and other home chores done *well ahead* of time...the day before surgery is always stressful enough without adding extra activities to it.
- If you smoke cigarettes, please quit (or at least cut back to 2 or 3 cigarettes per day) for a few weeks before and after surgery to lessen post-op pain, chance of infection, and slower tissue and incisional healing. This can be accomplished with the help of your family doctor.
- If you develop severe cold, cough, or flu-like symptoms; chest pain, breathing difficulty, or any other medical problems of recent onset in the days or weeks before surgery, please call us immediately and see your family physician. In your best interest, your surgery might need to be rescheduled for when you are feeling better and under less stress.
- Pre-sign several checks and other similar things, pre-stamp several envelopes, and get plenty of cash from the bank to avoid having to write as much when purchasing. If you live alone and are expecting several months of recovery, you might want to arrange direct bank deposits for most of your monthly bills.
- Put things you regularly use at convenient locations and heights – especially for drawers, closets, bathrooms, and kitchens.
- Stock up on dinners, soups, snacks, and other foods than can be opened and prepared with one hand. Put everything perishable in easy-to-open disposable, freezer-safe containers. Buy milk and other items in smaller, easier-to-handle sizes, and stock up on groceries for a week or two to cut down on shopping trips, which can increase hand pain and swelling.
- If needed, arrange for help with any housework, yard work, shopping, care of dependents at home, etc.
- Stock up on *disposable* (plastic – it's sturdier than paper) plates, cups, and utensils to avoid dishwashing. Larger-handled mugs are great when a disposable cup won't work. Some larger, rubber-handled kitchen utensils might also be helpful, since grip and pinch strength often take weeks to recover.
- We will tell you when to have your pre-op anesthesia/hospital visit, which is generally a few days before surgery, and which of your medications and herbal supplements to stop before surgery. The pre-op interview may be done by phone a day or two before surgery.
- Get a good night's rest before surgery; and though no perfect surgery exists, if you start to dwell on anything, think about the expected benefits of surgery, as well as the fact that you would not have been scheduled for a procedure that we did not think would help you. With many hand surgeries, you will begin to notice an improvement in your condition very quickly... often just a few days post-op.
- The night before (or morning of) surgery, please bathe well with a good anti-bacterial soap, thoroughly scrubbing your palm and under the *trimmed* fingernails of the hand/arm that is to be operated on. This will help the surgical scrub soap that we use immediately before surgery to work even better. Infections, though rare, almost always come from the germs that are found normally on your skin.
- Please write down any additional questions so that we may answer them on the day of surgery.

## DAY of Surgery

- If you are to have surgery with *more* than just a local anesthetic, do not eat or drink *anything* after midnight before your surgery day. You will be told if any of your medicine may be taken with *sip* of water early in the morning, as well as if you will need to bring any of your hand/arm splints with you to the surgery center.
- Stay by a phone (or keep your cell phone on) – we may need to contact you about your surgery time. Surgeries may often be done earlier in the day than scheduled. Rarely however, will your surgery be later than planned.
- Leave jewelry and valuables at home; wear loose-fitting clothes and easy-to-get-on shoes; and bring your insurance card, photo ID, etc. Ladies, please do not wear make-up or lipstick – and no nail polish on either index finger for intra-op monitoring purposes. You will likely have to remove eyewear, contacts, dentures, hearing aides, watches, and jewelry (especially rings); so it's best to leave everything that you can at home.
- If your arm is to be numbed up or you are to go to sleep (regional or general anesthetic) for outpatient, or "same-day" surgery at a surgery center, your procedure may be postponed or cancelled if you have had anything to eat or drink on the day of surgery, or if you don't have a ride home. *For surgery in the THS office, and local anesthesia only, you may continue to eat before surgery.*
- Prepare to be at the surgery center an hour or two early (you will be told when). There is always a lot of

## DAY of Surgery

mandatory paperwork, and *everyone* has to do this at *all* facilities. Much of it is to protect you, however, and to ensure that the right patient, facility, surgery, and surgeon all come together safely and smoothly. Being asked some of the same questions more than once is intentional and is mainly for your safety.

- Bring some of your favorite reading material, portable music player, someone to talk to, etc. to help calm your nerves. It is normal for *everyone* to be nervous immediately before *any* surgery.

## AFTER Surgery

- Depending on the type of anesthesia and the amount of relaxing medicine (sedative) that you are given, you may not remember much, if anything, about your procedure. You may not even remember seeing me immediately before the surgery. I will care for you in surgery as if you were a member of my own family and notify your companion(s) of the surgery start and finish time.
- If your companion must leave the surgery center after dropping you off, they need to give the receptionist their name and contact information. Although most of my surgeries will be completed in less than an hour, those with you may need to make a commitment for several hours to help you.
- You will go to a recovery area where you will be monitored until you are alert and comfortable enough to leave with the person(s) accompanying you.
- Do not be offended if the hospital does not allow family or friends in the pre-op holding and/or recovery rooms with you – there is often no extra room for them, and this policy is needed to protect your and others' privacy and well-being. Your companions are not allowed in the operating room.
- Before or after your surgery, I will talk only with the companion(s) that you give me permission to. I will clearly explain the surgery to them and review how they are to help with your needed post-op care.
- You will probably not feel any pain *immediately* after surgery since it is part of most of my surgeries to numb the operative site before the dressing is applied. In the hand, this will increase the blood flow to the fingers – making them warmer and redder than normal. These conditions may last for 10-12 hours or more – some patients may have up to a day of numbness with certain finger surgeries.
- If you are instructed to move your fingers after surgery, you will be able to do so even if they are numb; but you may need to use your other hand to help move them.
- Some amount of pain is normal for a few days after surgery, and we all tolerate and feel pain differently. No pain medicine will take away all the surgical pain. Take your prescribed pain medicine as instructed *well before* the surgical site begins to "wake up."
- Nausea, vomiting, sluggishness, constipation, and light-headedness (mild dizziness) are common side effects of anesthesia and pain medicine. Drinking lots of water and taking the pain medicine during small meals and snacks may help prevent these symptoms. Let me know if you are especially prone to nausea, and I will prescribe some medication to help lessen it.
- Some swelling of the fingers is normal, but strict elevation of the hand above the heart and movement of the fingers as instructed will help lessen this considerably in the first few days after surgery. Massaging the fingers from the fingertips backwards toward the dressing with your favorite hand lotion will also help – particularly upon awakening in the mornings or after forgetting to elevate the hand.
- **I will generally call you early in the evening of your surgery day to check on you.** Before or after that call, please notify me immediately of any blood-soaked bandages/dressings/splints, very severe pain that is uncontrolled with your prescription medication(s), uncontrolled vomiting or hand swelling, or any other serious concern that you may have about your surgery.
- After hours, please call my normal office phone, **(423) 282-5332**, for any of your immediate post-op questions. Stay on the line after you call this number, as the disconnecting sound is simply the call being forwarded to the answering service.
- *Routine* prescription requests and refills must be made between the hours of 8:30 am and 3:00 pm, and no later than two days before the prescription runs out for refills. **Please Note:** The answering service will not forward *routine* prescription requests after business hours or on weekends – unless you have had surgery in the past week.
- Plan on even the simplest tasks taking much longer to do. Be a *patient* patient!
- Avoid zippered, buttoned, and tight-fitting clothing and undergarments. Ladies have said it's easier to go bra-less or use front clasping and/or sports bras. In warmer months, shoes (especially Velcro-fastening ones) and sandals that can slip on without handling can save you time and frustration.

## AFTER Surgery

- In most cases, you will be able to shower after a few days and allow the operative site to get wet. Keep the dressing clean and dry until you are told it is alright to shower without it. Except for the smallest of hand or finger dressings, a hand therapist or my office staff will do the first dressing change.
- For some hand surgeries, hand therapy may be ordered for you days or weeks after surgery to help prevent any swelling, pain, stiffness, or incision problems. This can be an important part of your recovery. By the time you schedule any non-emergency surgery, you will likely already know when the first post-op hand therapy appointment is.
- Hand therapy frequency depends upon the complexity of your problem, surgery, and post-op rehabilitation and splinting needs; you may go 2 to 3 times, or you may go several days a week for several weeks. These therapists are specially-trained and their offices are specially-equipped to meet your individual hand rehab needs. They communicate frequently with my office and will help you get a better result than if you did not go to them – much the way a coach helps an athlete perform better.
- You will be seen in the THS office within a week or two after surgery. After that, the number and frequency of your visits will vary. Any required post-op therapy and x-rays, as well as evaluation of *other* hand and arm problems *unrelated* to your surgery, are not covered in the surgery fee.

## MORE ABOUT HAVING HAND SURGERY – A Patient’s Viewpoint

Written by J.J. – 06/19/11 right thumb arthritis surgery patient of Dr. Gorman’s

I thought it might be helpful to list some things that I learned from having surgery on my right thumb, especially since I am a right-handed man:

- Men, give up shaving for a few days. An itchy beard doesn’t begin to compare with what your skin will look like if you try to shave left-handed.
- Buy some comfortable slip-on shoes. Get a good book or two.
- Start saving your empty plastic bread sacks or small trash bags, and use large rubber bands to hold two of them over your bandage while taking a shower.
- It’s impossible to properly wash your left arm with your left hand.
- Men, don’t let your testosterone get in the way of asking for help. Getting your granddaughter to slice you a piece of cheese or open a jar of peanut butter doesn’t mean you’re a wimp. It simply means that you have the good sense to take care of yourself so that you can heal faster.
- Anything packaged in plastic or cellophane should be viewed with fear and loathing. *The Americans with Disabilities Act (ADA)* should have addressed this a long time ago.
- Buy some scissors for left-handed people. Scissors are wonderful for opening anything from a pack of peanuts to batteries for the remote, but only if you have the ones designed for the hand you’re using them with.
- If you don’t have push-button start, practice starting your car with your left hand. The effort required to turn the ignition key might seem insignificant right now, but after right thumb surgery it will be awful.
- Open a bottle of 7-UP by squeezing it between your right elbow and your side while trying to wrestle the cap off with your left hand. Less than 2 ounces spilled doesn’t count – unless it’s down the front of your pants!
- Asparagus is okay to eat with your fingers. As a matter of fact, for the first few days everything you eat becomes finger food – up to and including scrambled eggs.
- You can’t mow the lawn, and it’s really better if you don’t spend much time looking at it or the lawnmower. Same goes for the weed eater, chainsaw, and wheelbarrow. The best advice I can give you is to not even go into the basement or garage at all.
- Pay no attention to what the dog tells you – it’s just the pain medication.
- Seriously, you really need to do exactly what Dr. Gorman, his staff, and your hand therapist tell you to do. Ask questions until you understand exactly what it is you’re supposed to do (and what you’re *not* supposed to do). They are good people who know what they’re doing, and it will help you to heal faster if you behave yourself.