



Dr. Sullivan's Surgery Discharge Instructions

WOUND CARE

- Keep hand/arm elevated above heart level as much as possible for 24-48 hours.
- Keep dressing clean and dry. Cover with plastic glove when showering. **DO NOT remove dressing/splint.**
- You may remove dressing/bandage on _____ date. You may shower and pat dry. If steri strips present, leave in place. Do not soak in bath, hot tubs, pools, or sinks. Do not apply ointments or lotions to incisions.

ACTIVITY

- Weight bearing: _____ full _____ minimal _____ none
- If you received a nerve block, YOU MUST wear your sling at all times until the block has completely worn off.**
- No heavy lifting with operative hand/arm.
- Gently exercise any fingers that are not intentionally immobilized to maintain flexibility and to decrease swelling. Pain is the guide as to how vigorously to exercise fingers.
- Do not drive, operate machinery, or consume alcohol for the first 24 hrs after surgery and while taking pain pills.

DIET

- Advance diet as tolerated. Drink extra fluids.

NOTIFY YOUR PHYSICIAN (406-721-4436) FOR QUESTIONS/PROBLEMS OR:

- Unusual chest pain, leg pain or calf pain.
- Signs of infection such as redness, swelling or drainage. Chills or fever of 101 degrees or more.
- Persistent nausea/vomiting lasting longer than 24 hrs.
- If you do not urinate in 12 hours, go to the nearest emergency room.

MEDICATIONS

- Resume preoperative medications.
- You may need to take an over-the-counter laxative while taking your pain medications to avoid constipation.
- For milder pain, you may take Advil/Motrin (ibuprofen), Aleve, or Tylenol (acetaminophen). Most pain medications contain Tylenol so check with your pharmacist so you don't exceed the recommended amount of Tylenol in 24 hrs.
- If you are CPAP dependent, use your machine whenever sleeping or napping while using pain medications.
- You have been given the following pain medications: _____ at _____

FOLLOW-UP APPOINTMENT _____

- Keep prior scheduled appointment. Phone (406) 721 – 4436, ext. 5550 to verify appointment.
- Have a responsible adult with you for the next 24hrs.

Patient Signature

Nurse

Date