

Sports Therapy
Manual Therapy
Electrotherapy
Manipulation
Rehabilitation
Pre-habilitation
Clinical Pilates
Pre-Season Screening
Exercise Prescription
Massage

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AUSTRALIAN
PHYSIOTHERAPY
ASSOCIATION

Member

POST-OPERATIVE PHYSIOTHERAPY INFORMATION

HAND/WRIST SURGERY

Surgery:

Many different procedures can be performed on the wrist and hand. Most are done arthroscopically which means that superficially there are only small puncture marks made by the surgical instruments and these have been closed by steri-strips or a single stitch. If a more extensive procedure has been carried out on your wrist, a plaster cast or brace may be on your wrist for a period of time (your surgeon will discuss this with you). Although on the surface your surgery may seem only minor, the surgery inside the joint is more traumatic therefore your body must be given full opportunity to recover. This recovery is greatly dependent on your post-operative routine.

Use of Sling:

You may or may not have a sling, depending on your surgeon's preference. If you find you have a sling it is required to rest, elevate and support your wrist/hand while you are up and about, for a period of 3-4 days following surgery. You may like to use the sling for a little while longer whilst in crowds if your wrist/hand remains painful as a "warning sign" for others to keep clear, and to ensure the wrist/hand stays elevated to minimise swelling.

Elevation:

Elevation of your hand and wrist in the early days post-op is the most important way to reduce swelling, therefore reducing pain and aiding tissue healing. The wrist/hand should stay at the level of the heart or above the level of the heart with the hand is higher than your elbow, either on pillows or in a sling for the first 72 hours.

Ice:

Continue to ice your wrist front and back, with a plastic bag between the ice pack and your crepe bandage in order to keep it dry. Place the ice on for 10-15 mins, 3-4 times per day for up to 3 days post surgery.

Bandage/ Dressings

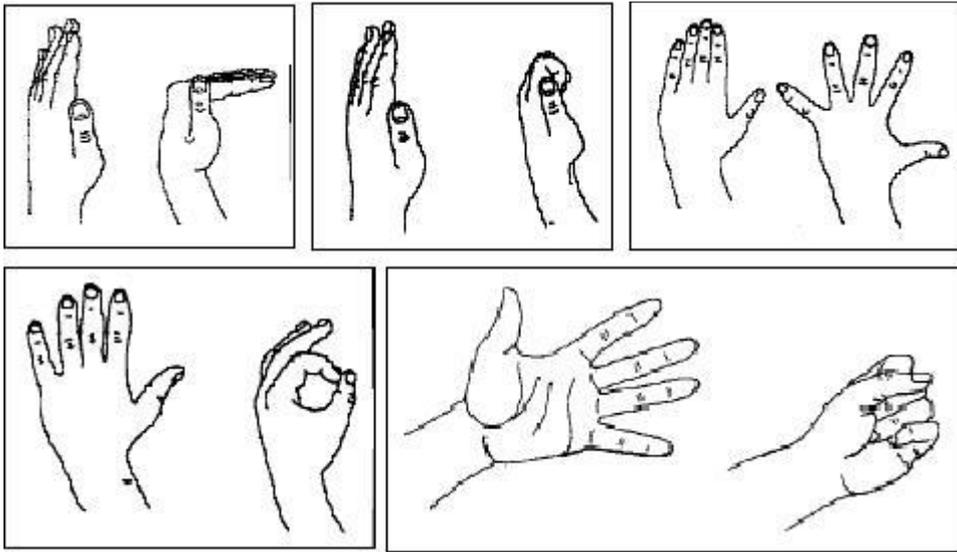
The wound/s will be covered by adhesive dressings and then a white crepe bandage prior to discharge from hospital. You are able to shower by covering your wrist dressings in a plastic bag in order to keep them clean and dry. Plaster casts also need to be kept dry whilst showering until your review with your surgeon. If you are unsure, please check with your after your surgery as to how to manage your dressings after you go home.

Exercises:

The following exercises are to be performed 3-4 times each day in order to maintain movement and strength in your operated arm.

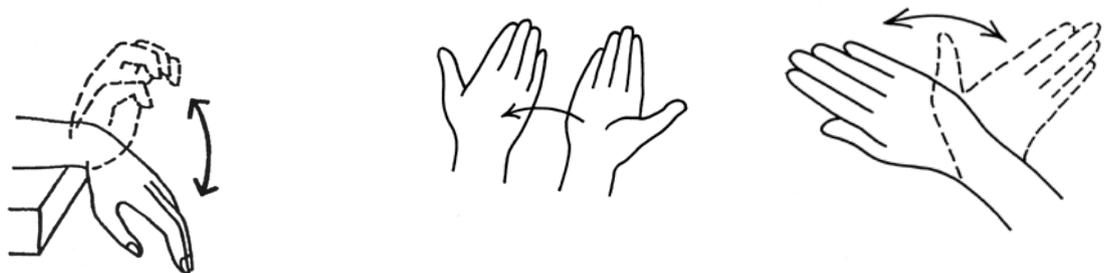
1. Finger and Hand Movements

Be sure to keep the elbow, fingers and hand mobile by bending and straightening all joints and to minimise swelling. It is much easier to keep these joints moving now than to let them get stiff.



2. Wrist movements

Start to gently move your wrist back and forth, side to side and turn palm up and down. These movements should stay within the limits of pain and the restriction of your bandage. Do not force these movements. 1 minute each



Further Rehabilitation/ Return to Normal Activity

Often you will be required to attend physiotherapy for a progressive regime of exercises to mobilise and strengthen your wrist for return to normal function and/ or sport. The wrist and hand are complicated joints that require intricate muscle function to perform normally, especially for the demands of sporting or work activities, and for fine motor activities. Physiotherapy can help guide your return to these activities. Your surgeon will advise you at the time of follow up review whether or not you will be required to have further physiotherapy.