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Bone and Joint Center – Hand Team 4245 Roosevelt Way NE Seattle, WA 98105-6920 Campus Box 354740

After Your Surgery for Thumb Ulnar Collateral Ligament Repair

Self-care and follow-up

□ Dressing and Wound Care

- After surgery, you will be in a bulky dressing (bandage) with a plaster splint that covers your thumb, wrist and forearm. The splint is similar to a cast. The splint cannot be removed and must be kept dry.
- When showering or bathing, cover the splint and your hand with a plastic bag to keep everything dry. The splint protects the incision and the surgical reconstruction, as well as lessen swelling.
- Elevate your hand above your heart as much as possible to lessen swelling and pain. Pillows and blankets under the arm are helpful when you go to sleep. Mild to moderate after surgery is common.
- The splint must remain in place until your follow-up appointment 10-14 days after surgery.



If your incision is red, foul-smelling, or there is drainage coming from it during daytime hours, call us right away at (206) 598-4263 (HAND). After office hours, you can call the hospital operator at (206) 598-6190 and ask for the Hand Fellow on-call. Go to the emergency room or urgent care if this happens at night or on the weekend.

You will likely have one 2-3 cm surgical incision on the inside of your thumb near your webspace.

□ Pain Management

 Ligament repairs can be painful. You will receive a prescription for narcotic pain medicine. For the first 2-3 days, take the pain medication around the clock to stay on top of the pain control. After 3 days, take the medicine only if you need it. It is important to know that even with pain medication you may still experience some pain.

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- You will also be given a prescription anti-inflammatory to take for the first 7-10 days after surgery. This will help with pain and swelling. You may also continue to take this medication after you stop the narcotic.
- Be sure to talk with the clinic nurse about how to take your pain medication. Taking the correct dose at the right time is very important.
- If you have uncomfortable side effects from the pain medicine, please call the nurse at (206) 598-4263 (HAND).

□ Driving

- Do not drive if you are taking narcotic pain medication. It is not safe. The medicine can make you sleepy and delay your reaction
- Once you are no longer taking the medicine, you may drive as soon as you can comfortably grip the steering wheel with both hands. It is generally best to avoid long drives until the initial dressing and plaster splint is removed.

☐ Activity

- Right after surgery, you may begin gentle finger exercises. Your nonoperative fingers. However, you will be unable to move the base of your thumb or your wrist because of the splint.
- You can use your hand for very light activities of daily living, such as eating, writing, typing, getting dressed, and brushing your teeth.
- Gripping, grasping, or pinching with the thumb are prohibited until your surgeon or therapist says you may do these things. Premature return to these activities may cause failure of the repair.

☐ Follow-Up Plan

- You will have a follow-up appointment with the surgical team scheduled
 10-14 days after surgery. At that visit:
 - o Your sutures will be removed and x-rays will be taken
 - You will be placed into custom removable brace by our hand therapist to protect your repair as it heals.
- You will wear the brace full-time (including night-time) to protect your repair for 4 more weeks. The brace may be removed for showering and gentle active motion exercises directed by the therapist.
- At 6 weeks after surgery, the supportive brace should be worn with activities, but you may do light tasks, such as typing without it. You are still advised to avoid gripping, grasping and twisting with your thumb.
- Three months after surgery, you will not need to use any braces or splints to support your hand and fingers. At this time you may grip, grasp,

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and twist using your thumb. You may also begin strengthening exercises if needed.

☐ Results

- You will be limited for the first 6 weeks with pain, weakness, and stiffness
 in the hand and thumb. Most patients have minimal pain by 6 weeks after
 surgery, with nearly full thumb and hand motion by 3 months.
- Your symptoms will continue to improve by working in therapy. It is important that you consistently work with your therapist to optimize motion and strength after surgery.
- Patients usually regain full motion and strength in their operative thumb

☐ For more information	ation, please visit ou	ır website at WWW	UWHAND.COM
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