

BEFORE YOUR HAND OR ARM SURGERY

THE DAY OF SURGERY

Welcome! We will try to make your experience as easy as possible.

Please leave valuables at home, but the surgery centers do require photo ID.

Remove all rings and jewelry.

Wear comfortable clothes.

The surgery centers often don't know their final schedule until 1-2 days prior, so your arrival time and surgery time may change. Please confirm your arrival time with your surgery facility the day before your surgery, if you haven't heard from them (please see page 3 for the phone numbers).

Please do not plan to return to work or attend meetings on the day of your surgery. Other than for the first case of the day, surgical start times can be very approximate, because we have to wait for the case(s) before yours to be completed, and sometimes surgeries run much longer than anticipated.

We most commonly use **one of four types of anesthesia**, and the instructions for before surgery are different depending on which type of anesthesia you selected:

If Local Anesthesia (also known as Straight Local or Novocaine Only or Wide Awake Anesthesia):

With Local Anesthesia, you will be completely awake during the surgery, without IV sedation or any other anesthesia, just like going to the dentist. We simply numb the area of your hand where we are going to be working. There will be no IV, and no breathing tube or mask. You will be laying down comfortably, with drapes up for sterility and so you don't have to look. I will inject the modern local anesthetic medicine to completely numb the area where we will be working. It will not numb your entire hand, just the small area where we will be working, so that you will be able to tell that we are working, but you will feel no pain. The numbing medicine does sting a little, for a few seconds, when it first goes in, but it works very quickly. And it usually lasts for 4-6 hours, so you will leave the surgery center with no pain. Occasionally there might still be some residual numbing or tingling effect even the next day.

With Local Anesthesia, you can:

Eat and drink normally on the day of your surgery.

Take all of your normal medications, including insulin.

You can safely continue to take any aspirin, baby aspirin, ibuprofen, advil, aleve, naproxyn, or other similar prescription Non-steroidal Anti-inflammatory drug (NSAID).

If you are on stronger blood thinner medication (coumadin, warfarin, plavix, clopidogrel, heparin, pradaxa, dabigatran, xarelto, rivaroxaban, others) please tell me before your surgery. Many of these

medications you can continue taking normally. Sometimes we will have you not take warfarin/Coumadin for 2-3 days before surgery depending on your blood thinner level (INR) and why you are taking the medication.

If you take narcotic medication every day you can continue it normally. You can drive yourself to and from the surgery center, but not if you are having both hands operated on the same day.

Your exact surgery time is, unfortunately, somewhat unpredictable, so please do not schedule or plan for work or meetings on the same day after your surgery.

If IV Sedation (also known as Conscious Sedation or Twilight Anesthesia):

With IV Sedation anesthesia, you will get an IV placed at the surgery center, and you will be given medication in the operating room by the anesthesia team to make you sleepy. Generally they do not put you completely asleep, but rather you will drift off to sleep and can be completely unaware of the surgery, if you want. You can discuss how sleepy or unaware you want to be with your anesthesia team in the pre-op area before surgery. Once you are sedated, I will completely numb the surgery site with the local anesthetic, so you will feel nothing of the injection or surgery. You will start to wake up when we are finishing with the surgery and putting on the bandages, and the sedation medicine usually wears off quite quickly. You will have no pain, and the numbing medication usually lasts about 4-6 hours, so you will leave the surgery center with no pain. Occasionally there might still be some residual numbing or tingling effect even the next day.

If Arm Block Anesthesia (also known as a regional block, axillary block, or supraclavicular block):

With Arm Block Anesthesia, you will get an IV and IV sedation, as described above, and then the anesthesiologist will make your entire upper limb numb by blocking the nerves near your arm pit or collar bone. The anesthesiologist will discuss all aspects of your anesthesia with you in consultation, in the pre-op room before surgery. After the block is placed, you will be given more medication in the operating room by the anesthesia team to make you sleepy. Generally they do not put you completely asleep, but rather you will drift off to sleep and can be completely unaware of the surgery, if you want. You can discuss how sleepy or unaware you want to be with your anesthesia team in the pre-op area before surgery. If the block is not making your arm fully numb then you might go to sleep as well, with a general anesthetic. You may start to wake up when we are finishing with the surgery and putting on the bandages, and the sedation medicine usually wears off quite quickly. You will generally have no pain, and the numbing medication usually lasts about 8 or more hours, so you will leave the surgery center with no pain. How long the block lasts is very variable, but the anesthesia team will give you an estimate. Occasionally there might still be some residual numbing or tingling effect even the next day. You need a sling to protect your arm until the block wears off.

If General Anesthesia:

With General Anesthesia, you will get an IV and then given medication so that you will be completely asleep during the surgery. Once you are asleep, I will completely numb the surgery site with the local anesthetic, so you will generally wake up with no pain. The numbing medication usually lasts about 4-6 hours, so you will leave the surgery center with no pain. Occasionally there might still be some residual numbing or tingling effect even the next day.

With IV Sedation OR Arm Block Anesthesia OR General Anesthesia, you will need to:

Have nothing to eat or drink for at least 8 hours prior to your surgery.

You can and should take your usual important medications with a sip of water on the day of your surgery.

If there is ANY chance that you are pregnant please do a pregnancy test the day before surgery and notify the surgery center.

You can safely continue to take any aspirin, baby aspirin, ibuprofen, advil, aleve, naproxyn, or other similar prescription Non-steroidal Anti-inflammatory drug (NSAID).

If you are on stronger blood thinner medication (coumadin, warfarin, plavix, clopidogrel, heparin, pradaxa, dabigatran, xarelto, rivaroxaban, others) please tell me before your surgery. Many of these medications you can continue taking normally, and other times they need to be held for a few days. Sometimes we will have you not take warfarin/Coumadin for 2-3 days before surgery depending on your blood thinner level (INR) and why you are taking the medication.

If you take narcotic medication every day you can continue it normally.

If you have Type 1 insulin dependent diabetes, please let me know and consult pre-operatively with your endocrinologist or family doctor. The plan generally includes taking all or half of your lantus or long-acting insulin the night before surgery, or continuing your normal basal rate on your pump overnight. Then depending on your morning blood sugar levels, either continue or lessen your basal rate so you don't get low. You may need to check your glucose more often than normal. Even without eating before surgery your blood sugar can rise due to the normal stress of surgery. You often can continue wearing your pump during the procedure. Bring your meter, etc to the surgery center. If you do get low, of course take something, preferably glucose tabs or hard candy.

You will need a driver to take you home, and a "responsible adult" to go over the post-op instructions with you at the surgery center, and stay with you that day after surgery.

You should not return to work or the office or attend meetings on the same day of your surgery.

Your exact surgery time is, unfortunately, somewhat unpredictable, so please do not schedule or plan for work or meetings on the same day after your surgery.

QUESTIONS?

For questions about your medical condition or surgery please contact me or Julie (my Hand Therapist) through our Care Coordinator Sarah at 952-456-7102.

For questions about scheduling, insurance, paperwork, or work slips please call Sarah, our Care Coordinator, at 952-456-7102.

For prescription refills please call Sarah at 952-456-7102.

For questions about surgery arrival time or other day-of-surgery questions please contact your Surgery Center location directly.

Crosstown Surgery Center: 952-456-7333

WestHealth Surgery Center: 763-577-7240

Abbott Northwestern Hospital: 612-863-3138

For after-hours medical urgent questions please reach the on-call Orthopedic Surgeon at 952-920-0970.

Our Walk-In Access Clinic, TCO Orthopedic Urgent Care, is open every day at the Edina location from 8:00 am – 8:00 pm, for urgent problems with your cast or other urgent post-op problems. It is also open from 8am – 8pm on Saturday and Sunday. For any of the many other metro locations and hours for our Urgent Care centers, please visit our website www.tcomn.com.

For billing questions, please call TCO Customer Service at 952-512-5625.

For questions about your surgery center bill, co-pays or out-of-pocket costs please call your specific surgery center directly (above).

For questions about your anesthesia bill, please call your anesthesia provided directly.

THANK YOU!