



After Your Flexor Tendon Surgery

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 fingers, 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, and helps to reduce 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 swelling after surgery is common.



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.

Surgical incisions will vary based on the extent of your tendon injury but may look like a zig-zag on the palmar surface

Pain Management

- Tendon repair or reconstruction 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.

- You will also receive a prescription strength anti-inflammatory. Take this for the first 7-10 days after surgery. You may continue to take this after you stop your narcotic pain medication if you have mild pain.
- 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 reactions
- Once you are no longer taking the medicine, you may drive as soon as you can comfortably grip the steering wheel with both hands. This may vary based on the extent of your tendon repair. Ask a member of the Hand Team for a specific timeframe for your particular case.

Activity

- 24-48 hours after surgery, you will begin therapy with a Hand Therapist. The Therapist will begin to teach you exercises that will help you recover movement but also protect your tendon repair.
- The Therapist will make you a custom splint to wear full-time (including nighttime for the first six weeks after surgery. It will protect your finger from stretching too far and prevent a rupture of your repair.
- For most patients, six weeks after surgery you will be released from wearing the splint for light activities, such as typing. You will still need to wear it at night and during physical activities for an additional six weeks.
- Most patients are released to normal activities three months after surgery.

Follow-Up Plan

- When you leave the surgery center, you should have a **follow-up** appointment with Roosevelt Hand Therapy (Seattle) or Eastside Specialty Clinic (Bellevue) already set for **2-3 weeks**.
- Your sutures will be removed.
- Dr. Huang will see you during your therapy visit
 - Your sutures will be removed.
 - The exercises you are doing in therapy will be assessed.
- You will have additional follow-up appointments with your surgeon at six weeks and twelve weeks after surgery to check your progress.

Results

- Your activities are very limited for the first 6 weeks due to the brace you must wear full-time.
- Your symptoms (pain, swelling, stiffness) will continue to improve as you work with therapy.
- Patients usually have good motion at 3 months, and continue to improve for up to 1 year after surgery.
- Most patients have good return of function in their operative hand. At the 3 month period, there are no activity restrictions and patients start working on strengthening with hand therapy as well as perform home exercises
- Some patients will require a **SECOND SURGERY** to free up scar tissue if they continue to have limited movement of the fingers **6 months** after flexor tendon repair surgery

For more information, please visit our website at WWW.UWHAND.COM