After Surgery Instructions

Ganglion Cyst Excision

1st Week

1. *Finger motion exercises are begun on the way home from the hospital.* They should be done slowly and gently, extending the fingers and thumb as straight as possible and then flexed or bent as far as the dressing allows. These exercises are not fast or forceful, being done approximately 50 repetitions an hour while awake.

2. *Elevation is important for the first 3 to 4 days.* *Try to keep the hand between the ceiling and your heart*, no matter what position you are in. At night, the hand and forearm can be rested on a pillow placed over your heart if you are on your back. Alternately, pillows can be placed at the side, or in front if you are sleeping on the non-operated side. Slings are to be avoided, since it is difficult to elevate the hand in a sling and much better to keep the elbow and shoulder moving.

3. *Local anesthetic* (numbing medicine) may be used at the end of the surgery, and usually lasts for 8 hours. It may occasionally last much longer, even up to several days. It is especially important to maintain elevation of the extremity if the numbing medicine is still in effect.

4. *Ice* may be applied over the area where the ganglion was removed, as long as the dressing is kept dry. The dressing is bulky, and not all the cold can get through, so the use of ice is optional. It may reduce pain and swelling, and should be used intermittently while you are awake.
5. **The dressing should be kept clean and dry.** If taking a shower, the dressing should be wrapped in a plastic bag or other waterproof cover. The dressing should not be changed until the first office visit after surgery. *If your ganglion was removed from the wrist, and if you have a wrist splint or brace in reasonably good shape at home, bring it with you to the first office visit after surgery.*

6. A narcotic **pain pill** prescription will be given to you at the hospital. These should be used as directed and as needed. Many patients do not need very many pain pills, or none altogether. If your pain can be managed by regular Tylenol or by an anti-inflammatory medicine like Advil, then narcotics may not be needed. If the narcotic pain pills are used, alcohol should not be taken, machinery not used, and no driving should be done.

7. **Light activity is permissible with the hand that has been operated on.** It is acceptable to use it to carry light objects, help with buttoning clothes, and perform simple tasks such as light writing. Although light use of the hand at home is desired, repetitive use in a work environment is avoided for the first two weeks.

8. If any problems or questions arise, call the Cedar Valley Hand Surgery office at 364-2697. If possible, please call during normal office hours.

**2nd Week**

1. At the first office visit, the bulky dressing is removed and a light dressing or large band-aid is applied. For cysts removed from the wrist, a wrist splint will be used. The sutures (stitches) are left in place, to be removed at the next office visit. **If a brace is used, the brace should be worn at all times except for showering.** After showering, the sutures can be cleaned with peroxide or alcohol. The dressing is replaced with a light gauze dressing or large band-aid. *The sutures should not be placed underwater, as in dishwater, bathwater, or swimming.*

2. It is important to keep the elbow and shoulder moving, and to **continue finger exercises.** Finger exercises should be done several times a day. When the splint is off for showering, finger exercises are easier. Try to flex and extend the fingers and thumb fully, touch each finger to your thumb, and touch your thumb to the small finger side of your palm.
3rd Week

1. For ganglions removed from the wrist, wrist brace will be gradually worn less and less. It does not need to be worn for sleeping beginning the third week. It should be removed for light activities first, and worn for strenuous activities. In a work environment, the brace should be worn for the full first 6 weeks.

2. **Motion exercises of the wrist are begun.** The wrist should be flexed and extended, deviated to both the thumb and small finger side, and rotated. Fingers exercises should also be continued. Exercises should be done several times a day, and gradual gains in motion should be experienced over the next 4 weeks. It is important to try to increase the total motion possible in each direction, usually slowly and gently. Going in each direction for a count of 10 will help. Full motion is usually achieved by the 6th week after surgery. **Strengthening exercises** can be started at this point. Soft equipment, such as racquetballs, stress balls, or nerf balls should be used initially. Motion and strengthening exercises are done 3 to 4 times a day for 5 to 10 minutes. They can be done while reading or watching television. As strength returns, more resistive equipment can be added to increase strengthening. Drug stores, therapists, or medical supply stores often sell exercise putty kits that may be beneficial. Grip strengtheners with coils or springs, often found in medical suppliers or athletic departments can also be added.

3. Three days after the sutures are removed, the hand can be soaked (as in bathwater or dishwater). The 3 to 4 day wait is to allow the suture holes to close over first.

4. **Scar massage with hand lotion** is started 3 to 4 days after suture removal, again to allow the suture holes to close first. Any type of hand lotion or cream is acceptable, and the lotion massage should be done twice a day for 3 to 5 minutes. Scar massage loosens up scar tissue, retrains nerve endings, and reduces swelling faster. Scar massage should be continued for **4 to 5 months** after surgery.