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## **Excision of Foreign Body Post-Operative Instructions**

### **Bandages & Ace Wrap:**

Your post-operative dressing has multiple layers you need to understand in order to properly care for your care of your wrist for the 2 weeks following surgery. Your incisions were closed with stitches, which were then covered with a non-adherent mesh and bacitracin.

The second layer consists of gauze padding. Over this is wrap called Bias which is similar to an ace bandage but less constrictive. Occasionally, there will be a small amount of blood in this dressing which is nothing to worry about, however if you see a lot of bleeding please call Dr. Pensak. Do not remove the dressings until I see you in the office usually 7-10 days after surgery.

### **Washing & Bathing:**

You should be careful to keep the dressing clean and dry until I see you in the office and remove it. Make sure you cover the dressing with a water-tight bag and rubber bands.

### **Motion, Ice & Elevation:**

One important goal following surgery is to minimize swelling around the wrist. The best way to achieve this is with the frequent application of ice and by keeping the hand and arm elevated. This is most important within the first 48 hours following surgery. The ice pack should be large (like a big zip-lock bag) and held firmly around your wrist. It is important to keep the entire hand and arm elevated on a couple of pillows. We follow the “one to four” rule – which means that for every hour your hand and arm is down it takes four hours to reverse the swelling.

The tendons that move your fingers are found close to the surgical site on your wrist. We do not want scar tissue to form that could stiffen your hand; therefore I want you to practice wiggling your fingers every hour. This will prevent hand stiffness.

### **Hand Therapy:**

A small percentage of patients will need hand therapy following surgery. When you are seen at your first post-operative appointment I will decide if therapy is necessary in your case.

For those that need therapy, the goal of therapy is to first assess how your body responded to the surgical procedure. They will re-introduce you to your hand/wrist so that you feel comfortable with your surgery and are not afraid to start doing things. Your therapist will start range of motion and strength exercises on your first visit. If they find anything unexpected they will let Dr. Pensak know right away.

### **Follow up appointment:**



530 Lakehurst Rd, Suite 101  
Toms River, NJ 08755

2 Hospital Plaza, Suite 310  
Old Bridge, NJ 08857  
732-349-8454

**Michael Pensak, M.D.**

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We try to give all of our patients a follow-up office visit at the time we schedule your surgery. Sometimes I find things or do things I did not anticipate during your surgical procedure, therefore I may want to see you in the office sooner than originally planned. Typically I want to see my patients in the office 7 to 10 days after surgery to check your hand for swelling and range of motion.

**Follow up appointment:** \_\_\_\_\_

**Medications:**

If I use a narcotic I will usually prescribe Oxycodone rather than Percocet so that you can supplement with Tylenol on the side and not have to worry about excessive Tylenol consumption. Oxycodone is Percocet without the Tylenol. This medication should be taken every 6 hours at the dose prescribed. However, you may supplement with Ibuprofen and/or Tylenol every 6 hours, offset by three hours from the narcotic. For example, in a given 24 hour period, you would take Oxycodone at 6, 12, 18 and 24 hours and the Ibuprofen and/or Tylenol at 3, 9, 15, 21. This way, you have medication on board every 3 hours. I find that it leads to better pain relief. If you were ever told that you can't take non-steroidal anti-inflammatories which is the class of medication Ibuprofen belongs to, or that you can't take Tylenol, then simply stick with just the narcotic. Tylenol and Ibuprofen should be taken in accordance with the directions on the bottle.

Some patients, when taking the first few doses of Oxycodone, may experience nausea or an episode of vomiting. To prevent this, take the medicine with food and be patient while the medicine begins to work. Usually, after the first few doses the nausea will go away. This medication may also cause skin itching and a slight rash. If either of those happen please notify us but they will usually subside with Benadryl so long as you have no contraindications to taking that medication.

**What to watch out for:**

- Pain that is increasing every hour in spite of the pain medication
- Drainage from the wound more than 2 days after surgery
- Increasing redness around surgical site
- Pain or swelling your surgical site
- Fever greater than 101
- Unable to keep food or water down for more than one day

**Who to call for questions or problems:**

If you are having problems or there are questions you need answered then please call our office at 732-349-8454 and our staff will assist you. Our hours of operation for our phone room are as follows: Monday through Thursday 8:30am- 4:30pm and Friday 8:00am – 4:00pm.



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We realize that after surgery some problems or questions are urgent and cannot wait until normal working hours. Under these circumstances we have a service that will get the message to a doctor on call for our office by calling the main number 732-349-8454.

**\*\*\*If an emergency were to occur please go to the nearest ER for immediate attention.**

**Wishing you- All the Best,  
Michael Pensak, M.D.**