Carpal Tunnel Release is a surgery performed to reduce compressive forces on the median nerve which passes through the wrist joint underneath the Transverse Carpal Ligament. This ligament is divided to allow more room for the structures beneath, reducing or eliminating symptoms such as tingling, numbness, decreased grip strength and pain in the wrist and hand.

**Day 1-2 After Surgery**
- Rest wrist
- Immediately resume comfortable, pain-free movement of neck, shoulder and elbow to maintain glide of median nerve.
- Gently open and close hand (as shown below) within comfort range as tolerated every 1-2 hours.

**Tendon Glides**
- Leave your dressing on and keep it dry
- Cover your dressing when you shower the day after surgery. Place a garbage bag or newspaper bag around your hand. Some people have said that large animal examination gloves (available at Fleet Farm) work well. Seal the end with rubber bands (not recommended for children), Duct tape, or Press'n Seal wrap. If your dressing becomes soaked, change the dressing as described below. If a small amount of water gets on your dressing, you may try drying it with a blow dryer.
- It is okay to gently move your wrist in the dressing, but the bulkiness of the dressing will prevent full range of motion.

**Day 2-10 After Surgery**
- Remove your dressing prior to showering 2 days after surgery (such as....if surgery was on a Monday, then remove it prior to showering on Wednesday).
- Do not soak or submerge your incision, but it is okay to get your incision wet in the shower.
- Upon removing the Ace wrap, cotton roll and gauze, you will find either black stitches in your palm or tape (butterfly bandages or steri-strips) on your wrist.

*If you have tape:*
- Do not remove these tape strips
- This tape holds a suture in place and keeps the superficial layer of skin together
- This tape may get wet in the shower but do not soak or submerge your incision
- The tape will likely start falling off prior to your return visit. This is okay. Leave any attached tape alone until your next visit, since these hold the ends of a stitch.
You may see the end of a stitch sticking out from under the tape. It looks like fine fishing line. This is intentional.

- While your dressing is off, you may begin gentle wrist range of motion. You may not get all your motion back the first day, but you should increase your motion daily until your return visit.
- After showering, dab your incision dry. Reapply new gauze (available at pharmacies and drug stores) and reapply the Ace wrap. You do not need to reapply the cotton ball.
- Continue dressing changes daily. After 3-7 days, you may get by with a large Bandaid over your incision instead of the Ace bandage.
- You may notice bruising in your palm or forearm. This is normal and will resolve after a few weeks.
- Do not use any ointments or lotions on your incision within the first two weeks after surgery. These cause swelling and can increase the time it takes for your incision to heal.
- Begin gentle active range of motion to the wrist (shown below) 4-6 times daily for 5 minutes.

Day 10-14 After Surgery
- Have sutures removed by physician or therapist.
- If swelling persists, use ice, massage or contrast baths (see bottom).
- Begin scar management explained below:

Scar Management
Anytime an incision is made in the skin, a scar forms as a normal part of wound healing. A scar takes approximately three months to mature. Sometimes while the scar is maturing, important structures under the skin can adhere to the scar. These adhesions can prevent tendons from gliding smoothly and result in decreased range of motion.

Through proper scar management, these problems can be minimized or prevented. Once your sutures are removed and incision is completely healed, you are ready to begin scar management. This should be performed 4-6 times per day.

- Apply Vitamin E, a lotion that contains Vitamin E or cocoa butter over your scar. Lotion will soften your scar and also aid in removing old skin and debris.
- Perform the following methods of scar massage:
  - Using your opposite hand, move your two fingers clockwise, then counter-clockwise along the scar.
  - Pinch the skin up on either side of your scar along its entire length.
  - Rub two fingers along your scar, pushing each finger in an opposite direction from the other.

Desensitization
Increased sensitivity is not uncommon, even several weeks after surgery. Over-protecting the hypersensitive area will only make the condition worse.

- After incision is fully healed, massage with lotion that contains Vitamin E. You may also purchase Vitamin E capsules (available in the Vitamin section of grocery stores), poke them with a needle to release the Vitamin E oil on your incision.
- Rub with different textures of fabric, starting with fine/smooth textures, gradually working up to harder/coarser textures.
- Tap around the sensitive area, gradually moving inward. Increase density of material from cotton ball to sponge, to finger or eraser end of pencil.

Pillar Pain
Some patients are troubled with an ache in the area at the base of the palm which may interfere with hand function. This may be managed with supportive splinting to minimize discomfort and allow greater confidence with use of the hand.

Return to light activity 2-3 weeks after surgery
Avoid heavy grasp or firm repetitive gripping for 2-3 months

If you have any questions, contact Twin Cities Orthopedics at 651-439-8807.

*Contrast Baths (to reduce swelling)
Use two bowls large enough for your hand and wrist. Fill one with warm water and the other with cold water. Soak in
warm water for 1-2 minutes and then cold water for 1 minute. Alternate and continue for 10 minutes. End in warm water.

*Massage (to reduce swelling)*
Enclose tip of finger with other hand and slide toward wrist. For larger areas, massage toward the body in one direction only.