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Distal Radius Fracture – After Care

General

- Surgery for wrist fractures can lead to earlier return to wrist and hand use.
- Early management of swelling, pain control, and active motion of the hand will allow you to recover better and faster after surgery.

Immediately Before and After Surgery

- 1) **Swelling:** keep your hand elevated above the level of your heart.



- 2) **Pain:**
 - a. Tylenol 500mg every 4 hours (avoid if liver problems)
 - b. Ibuprofen 800mg every 8 hours (avoid if gastrointestinal issues or kidney issues)
 - c. Gabapentin 300mg every 8hours (avoid if age >65 or history of sleep apnea)
 - d. Narcotics as prescribed only if pain can't be controlled by the other medications.

Active and Passive Range of Motion of Hand

With your splint on you SHOULD completely open and close your fist 10 times every hour. You can safely use your other hand to help you with this.

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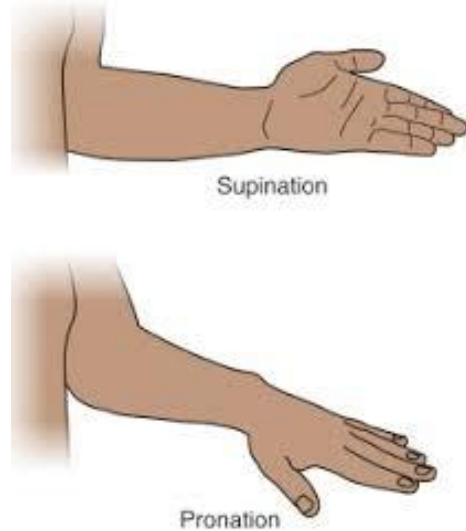
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Active Range of Motion of the Wrist

With your splint on you should be able to completely rotate your wrist as shown below 10 times per hour. Avoid using your other hand to help you do this.



Follow-up

You will be seen in the office within 1-2 weeks after surgery. Follow these instructions and you may be able to avoid formal hand therapy.

Watch for signs of infection such as redness, increased pain >24 hours after surgery, warmth, sudden increased swelling, drainage or a fever of 101F. If you have any signs of infection, please call the office.

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