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Post-Surgical Information
ENDOSCOPIC CARPAL TUNNEL RELEASE
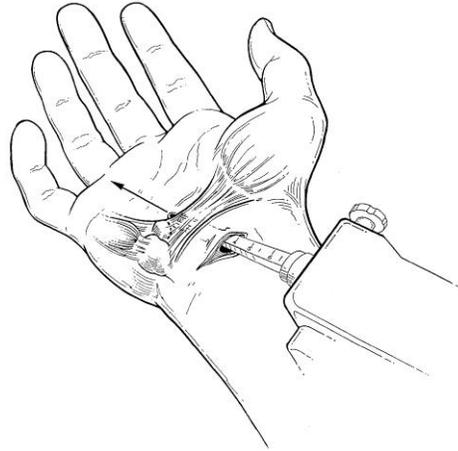
PROCEDURE: The transverse carpal ligament is cut to relieve pressure on the median nerve in the wrist using a video-assisted endoscope.

WHAT TO EXPECT: Most patients experience improvement in tingling, burning, and falling asleep of the hand and digits within days or sooner. Dull touch sensation and weakness may take much longer to improve, several months or more, and may never fully return to normal. Outcome is generally related to the severity and duration of the condition prior to surgery.

PAIN AFTER SURGERY: Local anesthetic is usually injected into the incision during surgery to minimize pain during the procedure and for a few hours afterward. Pain medication is prescribed for use as needed. Most patients require pain medication for only a few days after surgery. Soreness around the wrist incision and at the base of the palm is typical and may last several weeks, although this often resolves sooner.

INCISION & DRESSINGS: A sterile dressing is placed around the wrist at the end of the procedure. If the dressing is too tight, the outer elastic bandage should be unwrapped and rewrapped more loosely, leaving the deeper gauze intact. The entire dressing should be removed five days after surgery. The incision is covered with adhesive tapes which should be kept clean, dry, and in place until office follow-up. A Band-Aid may be used to cover the incision in the meantime. Light hand washing is fine after the first five days, but soaking or scrubbing should be avoided.

FOLLOW-UP AND RECOVERY: A follow-up visit for incision check and removal of any sutures should be scheduled within two weeks after surgery. Provided that healing is appropriate, no further appointments are typically needed. Soreness at the surgical site may require up to several weeks for resolution, and several months may be needed for all residual numbness and weakness to resolve. Patients with severe carpal tunnel syndrome may never entirely recover full nerve and hand function.