1.0 Policy Statement.................................................................................................................. 2
2.0 Purpose.................................................................................................................................. 2
3.0 Scope....................................................................................................................................... 2
4.0 Health & Safety.......................................................................................................................... 2
5.0 Responsibilities........................................................................................................................... 2
6.0 Definitions and Abbreviations .................................................................................................. 3
7.0 Guideline.................................................................................................................................... 3
  7.1 Pre-Operative............................................................................................................................. 3
  7.2 Post-Operative............................................................................................................................ 3
  7.2.1 Day 1................................................................................................................................... 3
  7.2.2 1-2 Weeks ............................................................................................................................ 4
  7.2.3 By 6 Weeks ........................................................................................................................... 4
8.0 Related Documents ...................................................................................................................... 4
9.0 Appendices.................................................................................................................................. 4
10.0 References.................................................................................................................................. 4
APPENDIX 9.1 Physiotools Exercise Sheet ...................................................................................... 5

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1.0 Policy Statement

1.1 It is the policy of Cappagh National Orthopaedic Hospital to provide a patient focused physiotherapy service delivered by chartered physiotherapists and support staff working in a well-equipped environment.

1.2 It is the policy of Cappagh National Orthopaedic Hospital to provide health professionals and the public with the necessary advice and guidance on physiotherapy rehabilitation.

2.0 Purpose

2.1 The purpose of this guideline is to advise health professionals and patients on the physiotherapy rehabilitation of a person undergoing carpal tunnel release.

3.0 Scope

3.1 This guideline applies to all staff involved in the care of a person undergoing carpal tunnel release community staff involved in the pre and post-operative care of the patient, the patient and their family.

4.0 Health & Safety

4.1 There are health and safety risks involved in patient care, namely risk of physical injury to patient and staff, risk of infection.

4.2 Physiotherapists have the necessary qualifications and clinical experience to carry out this guideline and to supervise unqualified support staff.

4.3 They must be eligible for membership of their professional body, the Irish Society of Chartered Physiotherapists (ISCP).

4.4 They undertake mandatory manual handling, basic life support training, fire safety, infection prevention and control and risk management.

4.5 They complete a minimum of 100 hours continuing professional development every three years as required by the ISCP.

5.0 Responsibilities

5.1 It is the responsibility of physiotherapists to implement this guideline.
6.0 Definitions and Abbreviations
The tendons of the forearm enter the hand under the carpal tunnel. Swelling of these tendons (swollen tenosynovium), usually from overuse, puts pressure on the median nerve, resulting in tingling and numbness in the thumb, index and middle fingers. This can eventually lead to pain, aching, stiffness, numbness, tingling or a burning sensation in the wrist or hand, especially the thumb, index and middle finger, often worse at night, and weakness and loss of control in the hands and fingers making it hard to grip. Carpal Tunnel Release is a surgical procedure where the carpal tunnel is cut to allow more space for the tendons and relieve pressure on the median nerve.

7.0 Guideline

7.1 Pre-Operative

7.1.1 Patients are usually seen as day surgery cases and pre-operative assessment should include:

7.1.1.1 Physical assessment as appropriate - include neck
7.1.1.2 Explanation of post-operative physiotherapy management.
7.1.1.3 Instruction on home exercise programme.
7.1.1.4 Advice sheet.

7.2 Post-Operative

7.2.1 Day 1

7.2.1.1 Check operation notes and any post-operative physiotherapy instructions.
7.2.1.2 Advice on ice and elevation to control swelling.
7.2.1.3 Maintain neck, shoulder and elbow range of movement.
7.2.1.4 Commence active exercises for the wrist and fingers of the surgical hand.
7.2.1.5 Advise to use the hand for light activities immediately e.g. dressing, washing, feeding and light household chores.
7.2.2 1-2 Weeks
7.2.2.1 Clinic and physiotherapy review.

7.2.2.2 Encourage full range and function of the affected wrist and hand.

7.2.2.3 Be careful when lifting hot or heavy objects in the first few weeks following surgery as your grip strength may be weak.

7.2.3 By 6 Weeks
7.2.3.1 Full function and use of hand.

8.0 Related Documents
Individual Physio tools exercise sheets

9.0 Appendices
9.1 Carpal Tunnel Release - Advice on Discharge

10.0 References
N/A
APPENDIX 9.1 Physiotools Exercise Sheet

1. Nursing will instruct you on the removal of the dressing over the wound.

2. Elevate the hands on a pillow when resting for the first 48 hours to control swelling.

3. You may use the hand for light activities of daily living immediately e.g. dressing, washing, feeding and light household activities.

4. Be careful when lifting hot or heavy objects in the first few weeks following surgery as your grip strength may be weak.

5. Please do your home exercises as instructed by your physiotherapist. The exercises should be continued until you have full use of the hand.