

Day Procedure Unit

Hand and Elbow Surgery under Regional Anaesthesia

Most hand and elbow surgery can be carried out using a technique known as regional anaesthesia (or 'block'), where your hand and arm are made numb for surgery. This means you stay awake for your operation and has many potential benefits. Regional anaesthesia is usually all that is needed but you can have some sedation to help you to relax during your surgery. You can discuss this with your anaesthetist beforehand.

Advantages of having a block

You will be awake for the duration of your surgery and although you may be able to feel some movement and touch you will not be able to feel any pain.

This type of anaesthetic helps to avoid the rare, but potential complications of general anaesthesia and is especially useful in patients who have other health problems. You will have a shorter recovery period and have good pain relief for many hours after the operation.

- When the numbness starts to wear off, we recommend that you take painkillers such as paracetamol and ibuprofen if required as directed on the instructions.
- You will be able to eat and drink immediately after your surgery and there is no risk of a sore-throat or headache.
- The risk of feeling or being sick is minimal with regional anaesthesia. You will not be drowsy and will be able to go home earlier than after a general anaesthetic.

Potential risks

Although the risks of regional anaesthesia are very small, very occasionally complications can occur such as:

- nerve damage
- bruising/bleeding
- local anaesthetic reactions

These will all be discussed with you in greater detail by your anaesthetist before theatre when you will have the opportunity to ask any questions.

What will happen to you on the day?

- You will change into a hospital gown and be taken round to the theatre where you will be made comfortable on a theatre trolley.
- A small intravenous line (drip) will be put into the back of the hand that is not being operated on and may be used for antibiotics or sedation if required.
- You will be attached to some routine monitoring which will measure your pulse, heart rate and oxygen levels.
- The nerves that supply your hand/arm can be blocked either in your armpit or above your collarbone depending on the type of operation you are having. Using an ultrasound probe the anaesthetist will find the nerve that needs to be blocked. After a small injection of local anaesthetic, a fine needle is guided towards the nerves and local anaesthetic is injected to block them.
- Your hand and arm will start to feel tingly and numb quite soon after the injection and may be heavy and difficult to move. This numbness will be carefully checked before surgery starts. Occasionally a 'top-up' of local anaesthetic is needed to ensure the block is complete.
- Before surgery a tight band (called a tourniquet) will be wrapped around the top of your arm. This prevents any bleeding in the area of the surgery.
- During the surgery a screen will be put up to prevent you seeing the operation. A member of staff will be with you at all times to answer any questions and to ensure you are comfortable.
- Following your surgery, you will return to the ward within a few minutes and will be able to eat and drink immediately.
- When you are ready, and your discharge medication is prepared, you may go home.

Discharge advice

- Your hand and arm may be numb and difficult to move for up to 24 hours. If the numbness lasts for longer than this, you should call the number listed below.
- Your hand/arm will be protected in a padded dressing which should be kept clean and dry and will be in a sling until the sensation and movement are back to normal. The sling will also reduce swelling and reduce any discomfort following your surgery. Your arm will need to be in a sling for 24 hours following the operation, but this may vary depending on your surgery. You will need to protect your arm until full sensation has returned. Avoid handling sharp or hot objects and do not attempt to drive. It will depend on what operation you have had as to when you are able to return to driving. Please discuss with your consultant and check with your insurance policy as these vary.
- You must start to take your painkillers as soon as the tingling feeling returns to your hand/arm. You should then take the painkillers regularly and not wait for the pain to worsen before you take painkillers.

Useful contacts for further information

If you have any queries prior to the procedures outlined, and its implications to you or your relatives/carers, please contact the Day Procedure Unit on **01603 286008** (Mon-Sat 8am-8pm).

For help Giving up Smoking: contact Smokefree Norfolk local freephone 0800 0854 113 or www.smokefreenorfolk.nhs.uk or email smokefreenorfolk@nchc.nhs.uk

Royal College of Anaesthetists

Web address: www.rcoa.ac.uk