

General Hand Surgery:

The doctor will review your general medical condition, the medications you are taking and the reasons for having the procedure. If you are determined to be a good candidate he will discuss options of treatment and the goals for your surgery.

Procedures are individualized to the patient. People are different and the results of surgery vary too. We are limited by the quality of your own skin and underlying support structures.

Before Surgery:

All medications that thin the blood may have to be stopped 2 weeks prior to surgery. A half of one aspirin thins the blood for 2 weeks! There are a host of vitamins, pain and arthritis medications that thin the blood as well.

You need to get a relative or friend to be with you for the first few days after the procedure. They will have to drive you to and from surgery and the office afterwards. Have some easy meals ready to be made. Do not plan on having friends over or leaving town for at least 3 weeks. You may be given pain medication and antibiotics. Get these before having the surgery so they are handy.

During Surgery:

Regional anesthesia with sedation is often used. The hand is totally asleep. We do not want you in pain or moving during the surgery. Most procedures are 1 to 2 hours long but there will be time needed to start IV's before surgery. The recovery room period may last a few hours as well.

After the Procedure:

While still in the operating room the completed surgery is impressive to see. Soon afterwards however, the swelling and bruising starts. The more extensive the surgery, the worse the bruising and swelling. This makes sense. If a surgeon tells you that there will be minimal or no swelling or bruising then the surgery cannot be very extensive. The hand is bandaged usually for 5 to 7 days during which time you will not be able to use your hand.

During the first few days after surgery the swelling and bruising worsens. It can be quite scary. The pain is not usually bad. By the end of the first week the swelling and discoloration begins to diminish.

Do not plan on going back to work or driving for at least the first week or two. You will be given pain medication and should be very careful about coordinated tasks. Even cooking is not a good idea. Some patients will require physical therapy sessions, at extra expense.

For the first few weeks after your surgery avoid strenuous activity. No lifting over 5 pounds. Do not do housework, you need rest. Avoid alcohol, smoking or even the presence of smokers.

Burn Surgery:

Hand burns require multiple surgeries if large areas of skin or scarred tissue are involved. Sometimes a minimal burn in just the wrong spot may require reconstructive surgery. Burns are complex injuries that are always worse than people originally think. Infection is often a problem. Burn victims require close follow up with frequent office visits.

Many times scar tissue that forms months after the original burn injury requires further care.

Carpal Tunnel Syndrome, CTS:

There is a wide band around the base of your wrist. Sometimes the contents within the band enlarge making it too tight. The band may need to be released. If not, hand, even arm and shoulder pain may result. numbness of the fingers is common. Often the hand pain wakes people up from sleep during the night.

If surgery is needed the results vary. If the CTS was going on for a long time, the improvement will be less. Sometimes there is no improvement but we may be able to keep it from getting



worse.

Dupuytren's Contracture:

Thick, contracting bands in the palm of your hand slowly develop that eventually prevents you from straightening your finger(s). This disorder may run in families. Surgery is the only treatment.

As with carpal tunnel syndrome, the results of surgery vary. Numbness and deformities are much more likely when trying to repair more advanced cases of the disease.



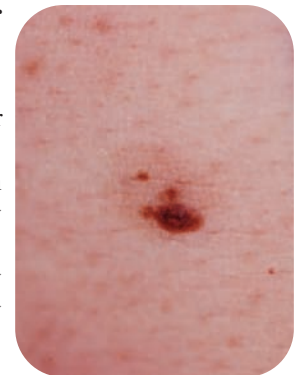
Rheumatoid Arthritis:

This is a destructive inflammation of the joints that is disfiguring and a functional disability.

Medications may ease the pain of arthritis but will not improve function. Splints and physical therapy may help but surgery may also be needed. Healing is usually impaired in patients with rheumatoid arthritis. It always takes more time to recover. This type of hand reconstruction is often very useful but never perfect. Multiple procedures are common.

Tumor or Skin Cancer Surgery:

Many types of tumors or growths occur in the hand. Some are malignant. Skin cancer is common. They may bleed with a minimal injury. They may grow fast or may be slow to advance. Pain may or may not be an issue.



Any knot or growth that does not look like it belongs on the hand must be evaluated by the doctor.

Common over-the-counter pain, allergy and cold medications as well as arthritis drugs may thin your blood. Do not take any of these without first discussing it with your doctor.

Complications may include bleeding problems, infection nerve and muscle damage, poor healing, adverse drug and anesthetic reactions. Some may require more surgery at additional cost. The skin surface may not be perfectly even. People who smoke or used to smoke have much more healing and infection problems than patients who never smoked. Your hand may be numb initially. Often, most of the sensation returns. This may be of benefit as it keeps pain to a minimum during the healing period. Hospitalization or just an overnight stay may be needed. Insurance companies may not usually pay for these when cosmetic surgery is involved. Nerve and vision damage may occur.

Following the doctors instructions minimizes the risk of problems. Do not do anything different without calling the doctor first. Most of the advise your friends and neighbors give you is probably incorrect. The doctor asks that you call him if you have any questions at all.

Hand surgery usually lasts forever. The skin, cartilage, bones and fat that may be reconstructed will usually make you appear better than you would have been if nothing was done. You do however continue to age. It is just that you have a new starting point.

Some discriminating patients will get additional procedures in the coming years so that they always look their best. But remember, even a single successful surgery may make you forever look better than you would have looked without the procedure.

Why Wait?



We believe that hand surgery should be performed in a hospital or hospital outpatient facility setting, not in the office. Safety is a major concern for us, and hospital facilities are much better equipped. We use the team approach with an operating room filled with registered nurses, registered OR technicians and M.D. anesthesiologists with their assistants. Most surgery is done on an outpatient basis. Also needed is a fully staffed and equipped recovery room.

Why settle for less?

Venice Plastic Surgery

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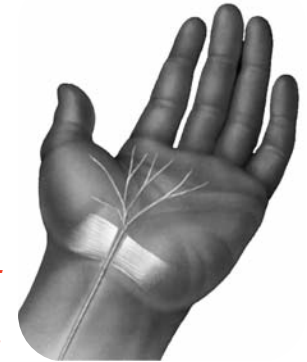
Hand Surgery

also known as
Hand Rehabilitation
and Reconstruction

It is sometimes performed together with other procedures as skin tumor removal

The procedures are designed to repair hand defects and restore function.

Sometimes, in advanced cases, the restoration of function is not possible, but further degradation can be minimized or prevented.



Venice Plastic Surgery
A. E. Haas, M.D.

Hand reconstruction is for men and women from about 1 year of age or older. There is no upper limit. The best candidates are generally healthy. They do not smoke, have diabetes or uncontrolled high blood pressure. The major limitations are your own skin and underlying tissue structures. Those who have had a lot of sun exposure or who have smoked cigarettes in the past have the poorest skin quality. Some patients will require secondary "tune up" procedures to further benefit their function. Multiple procedures will be at added cost.