

Endoscopic Carpal Tunnel Release – Post Operative Instructions

Wayne Weil, MD

Surgical Procedure

Endoscopic carpal tunnel release is performed to treat carpal tunnel syndrome by releasing the transverse carpal ligament to take pressure off the median nerve. The procedure is typically done through a small incision at the wrist (and sometimes a small incision in the palm) using a camera and specialized instruments. Skin is closed with sutures and covered with a dressing.

When you go home, you will have a light soft dressing on your wrist/hand. Swelling, bruising, soreness, and tenderness on either side of the palm (often called pillar pain) are common early in recovery.

Wound Care

- Keep the dressing clean and dry for the first 72 hours.
- When showering, cover your hand/wrist with a plastic bag to keep it dry.
- Do not submerge your hand in water (no swimming, baths, hot tubs) until stitches are removed.
- After you are instructed to remove the bulky dressing: leave steristrips in place (if present) until they fall off naturally.
- Keep the incision clean and dry except for showering. Do not apply ointment or lotion directly on the incision unless specifically instructed.
- Ice can help with swelling: up to 20 minutes at a time, with a thin cloth between the ice pack and skin (do not get the dressing wet).
- Elevation is key: keep your hand above heart level when resting during the first several days.

Pain Management

- Pain is usually mild to moderate for the first several days and can be worse at night. Elevation often helps the most.
- Use Tylenol (acetaminophen) and/or ibuprofen as needed unless otherwise instructed.
- If you were prescribed a stronger pain medication: take only as directed, and do not drive or drink alcohol while taking it.
- Numbness and tingling may improve quickly, but full nerve recovery can take weeks to months, especially if symptoms were severe or long-standing.

Activity

- Move your fingers often (open and close fully) starting the day of surgery to help prevent stiffness and reduce swelling.
- You may use your hand for light activities (typing, eating, gentle self-care) as comfort allows.
- Avoid heavy gripping, pushing/pulling, or lifting more than about a coffee cup for the first 1-2 weeks.
- Light aerobic activity is typically fine within a few days as long as your hand is protected and comfortable.

- Driving: do not drive until you are off narcotic pain medication and you can safely grip the wheel and control the vehicle.

Typical work guidance (varies by patient and job demands)

- Desk/typing work: often 1-2 days
- Light duty (no forceful gripping or lifting): often 1 to 2 weeks.
- Heavy manual work/vibration/impact: often 3 to 6 weeks.

Post Op Appointments

- You will typically be seen about 10 to 14 days after surgery to check the incision and remove sutures (if present).
- Hand therapy is not always required after endoscopic release, but may be recommended if you have stiffness, swelling, persistent pain, or delayed return of function

When to Call Our Office or Seek Urgent Care

- Increasing redness, warmth, pus-like drainage, or foul odor from the incision.
- Fever greater than 101 F.
- Severe swelling or pain not improving with elevation and medication.
- Fingers becoming cold, blue, very pale, or worsening numbness/weakness.
- Dressing feels excessively tight or you cannot move your fingers normally.

Frequently Asked Questions

Can I drive myself home?

No. You will need someone to drive you home after your procedure.

How quickly am I able to return to basic activities like typing?

Many patients can type and do basic activities within a few days, as comfort allows.

Will I need to be in a splint after surgery?

No. Patients typically have a light soft dressing initially. Some patients may be placed in a removable wrist brace for comfort. Follow your specific instructions.

When can I lift weights or do push-ups?

Avoid forceful gripping and weight-bearing through the palm early. Many patients gradually resume strengthening after the incision is healed and comfort improves, often 2 to 4+ weeks.

How soon can I return to sports like skiing, golf, or tennis?

Return depends on wound healing, grip strength, and comfort. Many patients return to higher-demand sports after the incision is healed and grip strength is returning, often 3 to 6+ weeks.

What kind of anesthesia will I have?

This is commonly performed with an intravenous regional anesthesia called a Bier Block or occasionally general anesthesia. Your anesthesia plan will be reviewed on the day of surgery.