

Anesthesia for Hand, Wrist, or Arm Surgery

Your surgeon will often request a nerve block for anesthesia. When patients receive a nerve block for anesthesia, they often receive sedation during the surgery. But they may also receive general anesthesia. Your wishes and those of your surgeon are vital in choosing the type of anesthesia. Your medical condition will also affect the choice.

The type of nerve block offered for this surgery is called a brachial plexus nerve block.

What is a nerve block?

A nerve block means that numbing medicine is placed near nerves. These nerves provide feeling to parts of the body.

What is a brachial plexus nerve block?

This type of nerve block involves injecting numbing medicine in one of 3 places:

- At the base of your neck
- Near your armpit
- In your upper arm

Where it is injected depends on the site of your surgery. The nerves that provide feeling to your arm travel from your neck down into your armpit. The nerves then travel down along your arm into your hand.

What are the benefits of a nerve block?

By placing nerve blocks we reduce the need for narcotic pain medicine. This lessens the amount of time it takes you to wake up. It also decreases your risk for nausea and vomiting. A breathing tube and general anesthesia are often not needed. This decreases possible breathing problems.

Research shows using nerve blocks for surgery will speed your recovery time. You may not need pain medicine for up to 12 hours after a nerve block. For these blocks, your fingers, hand, and most of your arm will remain numb for 12 to 18 hours.

What are the risks of a nerve block?

The risks for this nerve block are listed below.

- Bleeding caused by needle
- Infection caused by needle
- Nerve damage caused by needle
- Damage caused to your lung
- Damage caused to blood vessels in the area
- Shortness of breath
- For a time, you may have a droopy eyelid or small pupil

We take steps to keep these nerve blocks as safe as possible. This includes the use of ultrasound for placement of the injections. In most cases, the benefits outweigh the risks. We will discuss this with you on the day of surgery. These blocks have been done with great success at this hospital.

The Day of Surgery

You will arrive in the pre-surgery area. You will change into a gown. A nurse will review your health history and surgery plan.

You will see an anesthesiologist. This doctor will talk to you about your health and anesthesia choices for the day. If you will be getting a nerve block, you will meet the block nurse. The block nurse will talk to you about your health. The block nurse will take you to a room where the nerve block will be placed.

If you get a nerve block, you will receive medicine through your IV to make you sleepy. An ultrasound machine will be used to help guide the injections for the nerve block. Your skin may be numbed at the injection site.

When the nerve block is complete, you will go to the operating room. We will confirm your name, birth date, and procedure. You will receive medicines that will allow you to sleep during the surgery.

Once the surgery is over, you will wake up. You will return to your pre-surgery room. You will be able to go home once you have met certain standards.

If you have **general anesthesia**, you will go to the operating room from your pre-surgery room. We will confirm your name, birth date, and procedure. You will have IV medicine to make you fall asleep. You will have a breathing tube placed. You will remain asleep during the surgery. At the end of your surgery, we will wake you up. The breathing tube will be removed. You will go to the recovery room.

In the recovery room you will continue to wake up. You will receive any treatment you need for pain or nausea. After this recovery time, you will return to your pre-surgery room. You will be able to go home or to your hospital room once you have met certain standards.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright ©12/2021. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7296.