PROCEDURE PERFORMED: , Carpal tunnel release., INDICATIONS FOR SURGERY:, Nerve conduction study tests diagnostic of carpal tunnel syndrome. The patient failed to improve satisfactorily on conservative care, including anti-inflammatory medications and night splints., PROCEDURE: , The patient was brought to the operating room and, following a Bier block to the operative arm, the arm was prepped and draped in the usual manner., Utilizing an incision that was laid out to extend not more distally than the thumb web space or proximally to a position short of crossing the most prominent base of the palm and in line with the longitudinal base of the thenar eminence in line with the fourth ray, the soft tissue dissection was carried down sharply through the skin and subcutaneous fat to the transverse carpal ligament. It was identified at its distal edge. Using a hemostat to probe the carpal tunnel, sharp dissection utilizing scalpel and iris scissors were used to release the carpal tunnel from a distal-to-proximal direction in its entirety. The canal was probed with a small finger to verify no evidence of any bone prominences. The nerve was examined for any irregularity. There was slight hyperemia of the nerve and a slight hourglass deformity. Following an irrigation, the skin was approximated using interrupted simple and horizontal mattress #5 nylon suture. A sterile dressing was applied., The patient was taken to the recovery room in satisfactory condition., The time of the Bier block was 30 minutes., COMPLICATIONS: , None noted.