

Epicondylitis Debridement & Repair

Post-Operative Guidelines

This document will help you plan for your post-operative recovery course following surgery. **Please read and retain this information for future reference.** Many of the questions you may have later can be answered by referring to this information.

DIET

- Begin with clear liquids and light foods (jellos, soups, etc.).
- Progress to your normal diet if you are not nauseated.

ACTIVITY

- **Do not lift anything heavier than your cell phone with your operated arm.**
- Avoid shaking hands, pushing doors open, and do not attempt to open jars.
- You may return to sedentary work or school 2-3 days after surgery, if pain is tolerable.

SHOULDER SLING

- Your shoulder sling is to be worn for the first week after surgery while the splint is in place.
- **You will be transitioned from a splint into a wrist brace at your first follow-up visit**
 - **This brace is to be worn for a total duration of ~4 weeks after your surgery.**
- The shoulder sling can be discontinued at 1 week after surgery.
- A pillow behind the elbow may help when lying down to prevent the elbow from sliding backwards.

WOUND CARE

- **Keep the splint clean and dry – it will be removed at your first post op visit.**
- You may begin showering the day after your surgery.
 - To shower, remove the shoulder sling and use a waterproof shower bag (can be purchased on Amazon) or a well-sealed Saran wrap to keep the splint dry.
- Do not apply creams, ointment, or lotions to your incisions while they are healing (4 weeks).
- You should wash under your arm daily.

NORMAL SENSATIONS AND FINDINGS AFTER SURGERY

- Pain
- Finger swelling / stiffness up to 2 weeks
- Numbness and tingling in the fingers, this should resolve in 36 hours.
- Bruising
- Low grade temperature less than 101.0 for up to a week after surgery

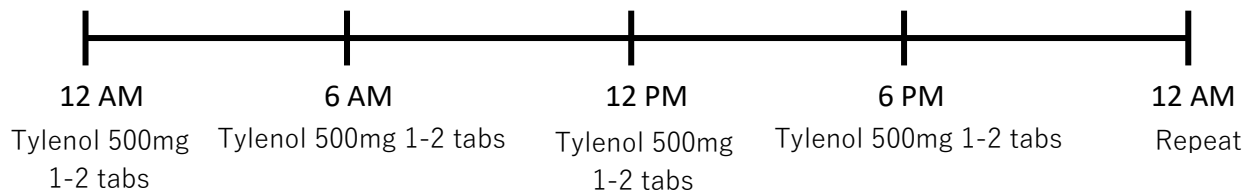
PAIN MANAGEMENT

- A nerve block is used at the time of surgery. This will wear off within 12-24 hours and it is not uncommon for patients to encounter more pain on the first or second day after surgery when swelling peaks.
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medications changed.
- **Do not drive a car or operate machinery while taking the narcotic or with brace on – typically 2-4 weeks after surgery.**
- Please avoid alcohol use while taking narcotic pain medication.
- **Please avoid NSAIDs for the first 4 weeks (Advil, Aleve, Mobic, etc.) as they may slow down the healing process.**

NON-NARCOTIC PAIN MEDICATIONS

Extra-Strength Tylenol (Acetaminophen) 500mg Tablets *(available over the counter)*

- Indication: pain, non-narcotic pain reliever
- Use: Take 1-2 tablets every 6 hours. Do not exceed 8 tablets in a 24-hour period.



NARCOTIC PAIN MEDICATIONS

OPIOIDS/NARCOTICS are prescription pain medications. One of the following medications will be prescribed and should only be used if adequate pain control is not achieved with combination of ice, Aleve, and extra-strength Tylenol outlined above. Side effects include constipation, nausea, drowsiness, dry mouth, itchiness. Use a 0-10 pain scale to decide how much medication to take:

Pain 0-4/10: No narcotics necessary

Pain 5-7/10: Take one tablet

Pain 8-10/10: Take two tablets

Tramadol (Ultram) 50mg tablet

- Indication: pain 5/10 or greater. Non-opioid *narcotic like* medication
- Use: 1-2 tabs every 6 hours as needed for pain. Do not take more than 8 tablets in any 24-hour time period.

Narcotics may cause nausea and constipation. Bowel regimen is recommended.

Colace (Docusate) 100 mg - available OTC

- Indication: constipation, stool softener. Take consistently while on narcotics.
- Use: Take 1 pill three times per day while you are taking narcotics.

Senokot (Senna) 8.6 mg - available OTC

- Indication: constipation, stool laxative. Take consistently while on narcotics.
- Use: Take 2 pills at bedtime. Increase to 2 pills twice daily if no bowel movement by post-surgery day 2.

Zofran (Ondansetron ODT) 4 mg - Prescription sent to pharmacy

- Indication: nausea. Take as needed.
- Use: Take 1 pill AS NEEDED every 8 hours, do not exceed 3 pills in 24 hours.

ICE THERAPY

- Icing is very important in the initial post-operative period and should begin immediately after surgery.
- Use ice packs for 30 minutes at a time, 3-4 times a day until your first post-operative visit. Care should be taken with icing to avoid frostbite to the skin.
- You do not need to wake up in the middle of the night to change icepacks.

EXERCISES

- Physical therapy is an important part of your recovery process.
- After your first post-operative visit with Dr. Ahsan, you will see a therapist 2 times a week.
- REMEMBER: You must NOT actively extend or flex your wrist by using your own muscle power.

EMERGENCIES**

Contact Dr. Ahsan's Team via **MyChart** or at **630-646-7000** if any of the following are present:

- Unrelenting pain.
- Fever (over 101° – it is normal to have a low-grade fever for the first day or two following surgery)
- Color change in hand and wrist (cold and blue)
- Difficulty breathing.
- Excessive nausea/vomiting
- If you have an emergency after office hours or on the weekend, contact the office at 630-646-7000 and you will be connected to our pager service. This will connect you with the Physician on call.
- If you have an emergency that requires immediate attention proceed to the nearest emergency room.

FOLLOW-UP CARE/QUESTIONS

- Your first post-operative appointment will be 1 week following surgery for splint removal, wound evaluation and to answer any questions you have regarding the procedure.
- Typically, the first occupational/physical therapy appointment is to begin 1 week after surgery.
- If you have any further questions, please contact Dr. Ahsan's team directly.