

# Dr. Matthew L. Hansen, MD

*Sports Medicine and Shoulder Specialist*

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## POST-OPERATIVE EDUCATION: ELBOW SURGERY

### **SLING:**

You may be asked to use a sling following surgery. This should be worn at all times until you follow up in clinic. You can loosen the strap around your neck when you are seated and awake.

**MOVING YOUR ELBOW:** This is dependent on your procedure.

You may squeeze a ball with your arm in the sling to help decrease swelling in your hand. If you are not immobilized by a splint, it is OK for you to move your hand, wrist and elbow gently throughout the day.

**Ulnar Nerve Transposition:** You will be placed in a dressing during surgery. If this is not a hard splint, you may begin gentle passive range of motion (under power of your non-operative arm). Your surgeon will remove the dressing and/or splint at your first clinic visit and explain how to progress your range of motion.

**Elbow Ligament Reconstruction or Repair:** You will be placed in a splint or brace during surgery. Your surgeon will remove the splint in clinic and explain how to progress your range of motion. At that time a removeable brace will be dispensed, and will be worn typically for 6-12 weeks.

**Elbow Arthroscopy:** You may be placed in a splint during surgery. If this is not a hard splint, you may begin gentle passive range of motion (under power of your non-operative arm). Your surgeon will remove the dressing and/or splint at your first clinic visit and explain how to progress your range of motion.

### **ICE:**

Please note that with the dressings placed during surgery, you may notice decreased benefit from the ice. Often placing the ice adjacent to the surgical site, such as in the armpit, increases the effectiveness. Use as needed and if you notice benefit. Ice is most helpful in the first 3 days after surgery, but may help up to 2 weeks after surgery. We do not recommend that you use heat, as this can increase swelling.

If you chose not to purchase an ice machine, you may use a commercially available ice bag or fill a large plastic bag with ice and water. (Do not place a plastic bag directly on your skin, but place a towel on your elbow in between your skin and the ice bag.) You can ice your elbow 20 minutes on and 20 minutes off throughout the day. Do not ice your arm longer than 30 minutes at a time, as this can cause frost bite.

## **BANDAGES:**

Leave your dressing clean and dry and do not remove it prior to your postoperative clinic visit. Your surgeon will remove the dressing and discuss wound care at that time. If you have excessive swelling in your hand, and if elevation does not alleviate this, it is OK to loosen the ACE bandages without removing the splint.

## **MEDICATIONS:**

Narcotic pain medicine (such as Percocet – oxycodone or Norco – hydrocodone): Take this AS NEEDED only. Start with Percocet (stronger) if given a prescription for multiple narcotics. Transition to Norco (less potent) as your pain improves. You may stop narcotics whenever you can tolerate the pain. Do not take additional Tylenol (also called acetaminophen) with these medicines, as they already have Tylenol in them. You may SUBSTITUTE Tylenol for a narcotic pill if you choose to. Be certain that you do not exceed the maximum Tylenol dose as noted on the Tylenol bottle.

Stool softener: Pain medicines often cause constipation. It is best to take most of this medicine with some food, as it can cause a little stomach upset.

Diclofenac: This anti-inflammatory may assist in pain control, but more importantly prevents your body from forming abnormal bone around the hip as a result of the surgery and helps prevent blood clots.

Zofran (ondansetron): You may take this medication if you are having nausea or vomiting. You may also take the Phenergan pill with a pain pill to increase the effectiveness of the pain pill if needed.

Robaxin (methocarbamol): This muscle relaxer may help with spasms experienced commonly after elbow surgery.

ONLY if no tendon or ligament repair was performed: It is OK to take over-the-counter NSAIDs (Ibuprofen, Motrin, Advil, Naproxen, Aleve etc...) along with your pain medicine to increase the pain relief. You may take UP TO 4 Advil (800mg Ibuprofen) THREE times a day. You may take UP TO 2 Aleve twice a day.

## **FOLLOW-UP APPOINTMENTS:**

You should have a **follow-up appointment** with your surgeon in about 2 weeks. You may also have an additional visit with the Physician Assistant typically within 5-7 days of your surgery. Call (480) 964-2908 right away if you do not have an appointment already scheduled. We will check your incisions and remove any sutures at the 2-week visit. We will also answer any specific questions you may have about your surgery. You should start Physical Therapy as directed, as many patients benefit from PT after elbow surgery.

**CALL OUR OFFICE** at (480) 964-2908 with any urgent or emergent questions or concerns that you may have, or if you develop swelling in your leg with calf pain, swelling that will not go away when you elevate your leg, a temperature above 101.4, or drainage from your incisions.

If you experience high fever (above 102.5), chest pain, difficulty breathing, fainting: go to an **Emergency Department** close to your house.