

POSTOPERATIVE INSTRUCTIONS

LATERAL EPICONDYLITIS (TENNIS ELBOW) SURGERY

DIET

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

WOUND CARE

- Maintain your operative dressing, loosen bandage if swelling of the wrist or hand occurs
- It is normal for the elbow to bleed and swell following surgery – if blood soaks onto the bandage, do not become alarmed – reinforce with additional dressing
- Remove surgical dressing on the third post-operative day – if minimal drainage is present, apply a clean dressing over incisions and change daily
- To avoid infection, keep surgical incisions clean and dry – you may shower starting the day after surgery if you seal the surgical site with plastic around the ACE or over the band-aids if beyond the third post-operative day. NO immersion of operative arm (i.e. bath)

MEDICATIONS

- Pain medication is injected into the wound and elbow joint during surgery – this will wear off within 8-12 hours
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle
- Common side effects of the pain medication are nausea, drowsiness, and constipation – to decrease the side effects, take medication with food – if constipation occurs, consider taking an over-the-counter laxative
- If you are having problems with nausea and vomiting, contact the office at 908-224-1100
- Do not drive a car or operate machinery while taking the narcotic medication
- Ibuprofen 200-400mg (i.e. Advil) may be taken in between the narcotic pain medication to help smooth out the post-operative ‘peaks and valleys’, reduce overall amount of pain medication required, and increase the time intervals between narcotic pain medication usage

ACTIVITY

- Elevate the operative arm to chest level whenever possible to decrease swelling
- When sleeping or resting, inclined positions (i.e. reclining chair) and a pillow under the forearm for support may provide better comfort
- Do not engage in activities which increase pain/swelling (lifting or any repetitive wrist/elbow/shoulder movements) over the first 7-10 days following surgery
- Avoid long periods of sitting (without arm elevated) or long distance traveling for 2 weeks
- NO driving until instructed otherwise by physician
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable

IMMOBILIZER

- Your sling should be worn for comfort and removed for exercise and hygiene
- You may remove for gentle range of motion of your shoulder, elbow, wrist, and hand

ICE THERAPY

- Begin immediately after surgery
- Use icing machine continuously or ice packs (if machine not prescribed) every 2 hours for 20 minutes daily until your first post-operative visit – remember to keep arm elevated to level of chest while icing

EXERCISE

- Gentle shoulder, elbow, wrist, and hand range of motion exercises can be performed beginning on the first post-operative day
- Formal physical therapy (PT) will begin about 10-14 days post-operatively with a prescription provided at your first post-operative visit

FOR EMERGENCY

- Contact **Dr. El-Gazzar** or his office **New Edge Orthopedics** at **newedgeorthopedics@gmail.com** or **(201) 985-8967** if any of the following are present:
 - Painful swelling or numbness
 - Unrelenting pain
 - Fever (over 101° - it is normal to have a low grade fever for the first day or two following surgery) or chills
 - Redness around incisions
 - Color change in wrist or hand
 - Continuous drainage or bleeding from incision (a small amount of drainage is expected)
 - Difficulty breathing
 - Excessive nausea/vomiting

