

Adam J. Farber, MD

Sports Medicine and Orthopaedic Surgery
Board Certified; Fellowship-trained in Sports Medicine & Arthroscopic Surgery
P: 480-219-3342; F: 480-219-3271

POST-OPERATIVE INSTRUCTIONS LATERAL EPICONDYLITIS DEBRIDEMENT SURGERY

Splint Care

It is important to keep the post-operative splint clean, dry, and intact. Do not get the splint wet. Do not attempt to remove your splint. If the splint feels too tight, elevate the hand/forearm above your heart. If elevation fails to alleviate the sense of tightness, please contact the office for further instructions.

Elevation

After surgery it is important to elevate the affected extremity as much as possible. Typically it is recommended to elevate the hand ABOVE THE HEART AS MUCH AS POSSIBLE. Increased elevation will decrease swelling which will decrease pain and lessen the risk for wound healing complications.

Activity

You may use your fingers for fine movements such as writing or working on a computer. You should avoid any lifting or gripping activities with the affected extremity. You should avoid any rotational activities of the forearm with the affected extremity.

Showe ring

Do not get the splint wet. You may take a bath while leaving the splint OUT OF the bathtub. Alternatively take a shower while placing a plastic bag over the splint with rubber bands and/or saran wrap to seal off the bag.

Medications

Take as prescribed. **Narcotic pain medications**: Percocet or Vicodin is used for severe pain. It can be taken up to every four hours as necessary. Most patients only require Vicodin or Percocet for the first week. Once pain is better controlled, you may simply take extra strength Tylenol one to two tabs every six hours. Be careful not to take Tylenol in addition to Vicodin or Percocet as there is already Tylenol in the Vicodin and Percocet. Take these medications with food. If you have any problems taking the medications please stop them immediately and notify the office.

Local anesthetics are put into the elbow during surgery. It is not uncommon for patients to encounter more pain on the first or second day after surgery when the effect of these medications wears off. Using the pain medication as directed will help control pain with little risk of complication. Taking pain medication before bedtime will assist in sleeping. It is important not to drink or drive while taking narcotic medication.

You can supplement the narcotic medications with 200 mg or 400 mg of ibuprofen every 4-6 hours. You should resume your normal medications for other conditions the day after surgery. We have no specific diet restrictions after surgery but extensive use of narcotics can lead to constipation. High fiber diet, lots of fluids, and muscle activity can prevent this occurrence.

Eating

The anesthetic drugs used during your surgery may cause nausea for the first 24 hours. If nausea is encountered, drink only clear liquids (i.e. Sprite or 7-up). The only solids should be dry crackers or toast. If nausea and vomiting become severe or the patient shows signs of dehydration (lack of urination) please call the doctor or the surgical center.

Follow-Up

Your initial follow up visit will usually be 10-12 days after surgery.

If you have any questions, concerns, or problems please feel free to contact the office at (480) 219-3342.