

## ELBOW DISTAL BICEPS REPAIR GENERAL POST OP GUIDELINES

### DR. SALVATORE FRANGIAMORE

**Your weightbearing status is:** NON weight bearing, keep brace locked until first post op visit.

#### **ELBOW HINGED BRACE:**

Please wear your elbow brace from that point on as instructed for your specific surgical protocol following the guidelines below. Keep it locked in position

This should be worn **AT ALL TIMES** – including at night to support the elbow and take tension off your surgical site. Adjustments can be made to the brace by our staff or your Physical Therapist to make it as comfortable as possible within the rehab protocol guidelines. Off only for hygiene as allowed above or changing clothes.

- **You will wear a sling until the nerve block wears off (within 48 hours). Can be used for comfort only after this point.**
- It is important to begin passive range of motion as soon as tolerable post-operative to avoid stiffness.

Please follow these instructions carefully. If you have any questions, please contact us:

\*If it is after hours, call our answering service (**440-349-7137 ext. 52015**) and you will be directed to the appropriate physician on call with Dr. Frangiamore.

\*Please direct any postop medical or clinical questions, physical therapy issues, or questions related to paperwork to our team at **440-349-7137 ext. 52015**

## FOLLOW-UP APPOINTMENT

We would like to see you for a post-operative visit at: 1 weeks, 6 weeks, and 16 weeks (4 months) after your procedure. If you have not made your post-operative appointments with Dr. Frangiamore, please call Dr. Frangiamore at 440-349-7137 ext. 52015 to schedule your appointment. If you live outside the Cleveland area and will be returning back to your hometown, please schedule an appointment prior to your departure. The 6 week follow up can typically be done virtually, so ask about this option if interested.

## INCISION DRESSINGS:

- Your shoulder was dressed in the sterile environment in the operating room. The incisions were closed with absorbable sutures that do NOT need removed. You have a bulky dressing (ace bandage and white cotton roll) can be removed after 72 hours -can shower with the waterproof bandage that is sitting directly over the incision (will see under this)
- **This waterproof bandage should be removed 7 days after surgery.**

- On a daily basis, evaluate the incision for drainage, redness surrounding the incision or red streaks. These combined with increasing pain and fever (Temp greater than 101 degrees) can be signs of infection – please notify our office right away

### General Showering/Bathing:

- You may take a shower 72 hours after surgery, the bandage over the incision is waterproof,
- Clean, soapy water may run over the area, but do not attempt to scrub or wash the area vigorously.
- Soaking the incisions in a tub, pool or hot tub is NOT permitted until instructed by your physician, generally 3 weeks post-operatively.
- Avoid creams, salves or ointments unless instructed to do so by your physician.

### Sutures:

- The sutures used during your surgery are typically dissolvable and will dissolve under your skin over time.
- Please keep your wounds clean and dry for the first 2 weeks by following the instructions above regarding dressing changes.
- Some incisions may have blue non-absorbable sutures which will be removed at your first post-operative visit.

## POST OPERATIVE MEDICATIONS

- You may resume your regular medicines after surgery.
- **Please take a baby aspirin (81 mg) daily for 28 days post op to prevent blood clots**
- We often prescribe narcotic pain medications to aid in controlling post-operative pain – such as Percocet (oxycodone/acetaminophen) or Norco (hydrocodone/acetaminophen). These medications may not alleviate ALL of your discomfort, but should help manage your pain along with elevation of your extremity and icing.
- You MAY take over the counter (OTC) Medications) in addition to your narcotic medication and this is encouraged! Occasionally we may provide you with a prescription for an anti-inflammatory **called ketorolac (Toradol) which you can take with your pain medication** (recommend staggering timewise for maximum benefit). **If we do not prescribe this, you can use ibuprofen or naproxen (Aleve).**
- Please take medications as instructed. Do not mix with alcohol or drive while you are taking narcotics. While the prescription is written for one tablet every 6 hours, you may increase the dose if needed to 1-2 tablets every 4-6 hours.
- We CAN refill your pain medications if you require more than the typical 5-7 days of medications. To request a refill, you can: 1. Call the office 2. Send a message through the electronic medical record

**Pain medications will only be refilled in the post-operative period. The State of Ohio does not allow us to manage chronic pain, so no prescriptions will be filled past your 6 week post operative visit.** It is crucial to keep this in mind as you wean off these medications. Unfortunately, some of these medications may not be covered by your insurance. If this is the case, we will not be able to obtain authorization for coverage.

**\*\*It is the strict policy of this office that narcotics and other pain medications will NOT be refilled on weekends or after hours.**

- Please note: narcotics are highly addictive pain medications that can create side effects such as constipation and lethargy. Many narcotics, such as Percocet, Norco and Vicodin, also contain acetaminophen (Tylenol), which if taken in increasing doses can cause liver failure and even death. All narcotic pain medications are highly addictive and must be used with caution because they cause tolerance whereby the body adapts to them and, in order to achieve pain relief, the body requires increasing doses.
- **Constipation:** May occur when taking oral pain medications. Please increase your water intake while taking these medications. If you are experiencing discomfort due to constipation, you may take an over the counter stool softener (Colace, Miralax, Milk of Magnesia, etc).

## **Reducing blood clot risk after surgery:**

You may be prescribed a blood thinner after surgery, such as Aspirin. This is to be taken daily for 28 days following surgery to prevent blood clots. Alternatives to Aspirin will be utilized if you have an allergy to Aspirin. If you were on a blood thinner prior to surgery, you likely will resume that medication as instructed by your physician and may not be required to take Aspirin. If you have a history of blood clots, a different blood thinner might be required.

## **What can you eat?**

You may eat a regular diet following your surgery. Please drink plenty of non-alcoholic, non-caffeinated beverages. Please do not consume alcohol with your pain medications.

## **Ice Management to reduce swelling and inflammation:**

Ice your operative site 5-6 times a day 20 minutes at a time. An ice machine will be provided to you post operatively. This will help decrease swelling and pain after your surgery. Use the ice machine as much as possible when you get home at intervals of 20 minutes. You should perform this consistently for a minimum of two weeks after surgery

## **PHYSICAL THERAPY OVERVIEW**

**Ulnar Collateral Ligaments reconstruction brief rehab protocol initial weeks:**

See specific protocol for details, you will be given a more detailed copy.

Week 1: elbow brace locked at 90-110 degrees flexion (until first post operative appointment!  
Wrist active ROM and making fist & extending fingers immediately and as tolerated

## **COMMON QUESTIONS AND ANSWERS**

### **When can I drive after surgery?**

- This is dependent on which arm was operated on (dominant versus non dominant), the frequency and distance you will be driving, and your confidence level using your operative arm for support only. You must also be off of narcotic pain medications prior to driving. You can usually resume within 4-5 days of the operation.
- We often recommend practicing in an empty parking lot before getting on the roads for the first time if there is any question in your ability and comfort level. There can be NO HESITATION!

### **When Can I go back to work?**

This is dependent on your surgery and what type of work you do, but generally speaking for an arthroscopic surgery you can return to a sedentary desk job or sitting job anywhere from 1-3 weeks, high demand overhead job at 1-3 months.

