

Post Op Instructions: Ulnar Nerve Transposition

**PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION IF NECESSARY -
DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE SURGERY CENTER OR VIA PHONE/EMAIL
TO OUR STAFF AFTER ARRIVING HOME**

WOUND CARE

- Loosen bandage if swelling or progressive numbness occurs in the extremity.
- It is normal for the joint to bleed and swell following surgery — if blood soaks onto the ACE bandage, simply reinforce with additional gauze dressing for the remainder of the day and re-check. The ACE bandage can be laundered in a normal fashion and reused.
- Remove the ACE bandage and gauze 1 week after surgery. Leave SteriStrips (clear Band-Aids) on. It is optional to replace the gauze and re-wrap the ACE bandage.
- 48 hours after surgery it is ok to shower. Keep a waterproof bag over your arm to keep the dressing dry while showering. Please keep SteriStrips on when showering. It is OK if they fall off in the shower but do not rub the incision site.

MEDICATIONS

- You can begin the prescription pain medication provided to you upon arriving home and continue every 4-6 hours as needed for pain.
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per the 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 such as Dulcolax or Colace.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed (1-800-974-5633)
- Do not drive a car or operate machinery while taking narcotic medication.
- Ibuprofen 200-600mg (i.e. Advil) may be taken in between the narcotic pain medication to help smooth out the post-operative ‘peaks and valleys’, reduce the overall amount of pain medication required, and increase the time intervals between narcotic pain medication usage.

ICE THERAPY

- Beginning immediately following surgery, use the ice machine (when prescribed as directed for the first 2-3 days following surgery. Ice at your discretion thereafter.
- When using “real” ice, avoid direct skin contact > 20 mins to prevent damage/frostbite of the skin. Check the skin frequently for excessive redness, blistering, or other signs of frostbite. When using the ice machine, it is okay to ice continuously as long as you check the skin frequently.

ACTIVITY

- For the first two weeks after surgery, the sling should be worn. You may remove it for exercises and physical therapy.
- It is ok to sleep however comfortable you are.
- Do not engage in activities which increase elbow pain over the first 7-10 days following surgery.
- NO driving. You will be cleared to drive after the first postoperative visit if narcotic pain medication has been discontinued.
- Air travel is permitted 14 days after surgery. Air travel and immobility increase the risk of blood clots. Unless you have been previously instructed to avoid aspirin products for medical reasons, or if you are under age 16, ensure that you are taking 81 mg baby aspirin twice daily beginning the day after surgery to minimize the risk of blood clot.

EXERCISE

- Begin exercises 3x daily starting the day after surgery (wrist flexion/extension, elbow flexion/extension, pendulum swings, shoulder range of motion) unless otherwise instructed. See the last page for reference. If the exercises cause pain, stop, and try again later in the day.
- Elbow stiffness and discomfort are normal following surgery.
- Formal physical therapy (PT) will begin after your first post-op visit.

DIET

- Begin with clear liquids and light foods (Jello, soup, etc.).
- Progress to your normal diet as tolerated.

APPOINTMENT

- Your postoperative appointment will be made prior to surgery. You will receive a reminder from the office prior to the visit. This will be 10-14 days after surgery at your surgeon's office.

****EMERGENCIES****

Contact the practice hotline at 1-800-974-5633 if any of the following are present:

- Unrelenting pain, despite taking medications as prescribed.
- Fever (over 101°). It is normal to have a low-grade fever following surgery.
- Continuous drainage or bleeding from incisions (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting uncontrolled

DO NOT CALL THE HOSPITAL OR SURGICENTER FOR EMERGENCIES IF YOU HAVE A NEED THAT REQUIRES IMMEDIATE ATTENTION, PROCEED TO THE NEAREST EMERGENCY ROOM

ELBOW POST-OPERATIVE EXERCISES

WRIST FLEXION / EXTENSION



Actively bend wrist forward.
Then backwards as far as you can.
Repeat 10-15 times. Do 3 sessions per day.