Alexander E. Weber, MD

Sports Medicine Surgery

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POSTOPERATIVE INSTRUCTIONS

LATERAL EPICONDYLITIS (TENNIS ELBOW) SURGERY

DIET

- Begin with clear liquids and light foods (jello, 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
 - o DO NOT drive a car or operate machinery while taking narcotic medication
- 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 to possibly have your medication changed
- 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 2-3 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 icing immediately after surgery.
- Use icing machine for up to 20 minutes out of every hour until your first post-op visit.
- If you do not purchase an ice machine, please use ice packs to ice the surgical site. Ice packs can be applied for up to 20 minutes out of every hour until your first post-op visit.
- If braced, loosen brace to avoid added pressure.

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

FOLLOW-UP CARE/QUESTIONS

- Dr. Weber will call you (typically on your first day after surgery) to address any questions or concerns. If you have not been contacted within 48 hours of surgery, please call the office at 818-658-5930.
- If you do not already have a post-operative appointment scheduled, please contact the office during normal office hours and ask for appointment scheduling at 818-658-5930.
- For any other questions or concerns please contact Dr. Weber via email (weberae@usc.edu), at the office (818-658-5930), or by cell (518-928-8389).

EMERGENCIES

Contact Dr. Weber at the office (818-658-5930) or by cell (518-928-8389) if any of the following are present:

- Painful swelling or numbness
- Unrelenting pain
- Fever (note it is normal to have a low-grade fever (101° and under) 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

Proceed to the nearest emergency room if you have an emergency that requires immediate attention.