

## **POSTOPERATIVE INSTRUCTIONS** **DISTAL BICEPS REPAIR**

### **DIET**

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

### **WOUND CARE**

- There will be a dressing placed after surgery. As long as the dressing remains clean and intact it may be left alone.
  - If soiled or starting to peel off, the dressing may be removed, but LEAVE STERI-STRIPS (white tape) in place.
  - You may shower after the splint is removed.
  - Cover incision sites with waterproof bandage prior to getting into the shower.
  - If incisions accidentally get wet, DO NOT SCRUB – gently pat them dry with a clean towel.
  - It is normal to see a lot of blood-tinged soaked fluid on the bandages. It may appear to be a pinkish-yellow fluid and is normal.
- You may shower by placing a large garbage bag over your sling starting the day after surgery
- Do not soak in any pool/bath water until 4 weeks after surgery.

### **GENERAL ACTIVITY LEVEL**

- Keep your brace on at all times, with no motion of the elbow until cleared by Dr. Weber.
- Wrist and shoulder range of motion is OK
- No driving until instructed otherwise by Dr. Weber.
- May return to sedentary work or school 3-4 days after surgery if pain is tolerable

### **MEDICATIONS**

- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle.
  - DO NOT drive a car or operate machinery while taking narcotic medication
- Primary Medication = Norco (Hydrocodone)
  - Take 1 – 2 tablets every 4 – 6 hours as needed
  - Max of 12 pills per day
  - Plan on using it for 2 to 5 days, depending on level of pain
  - Do NOT take additional Tylenol (Acetaminophen) while taking Norco
- 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 400-600mg (e.g. 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.

### **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](mailto: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.**