

# Dr. Matthew L. Hansen, MD

*Sports Medicine and Shoulder Specialist*

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## POST-OPERATIVE EDUCATION: DISTAL BICEPS OR TRICEPS REPAIR

### **SLING:**

You will be asked to use a sling following surgery. This should be worn at all times until you follow up in clinic. You can loosen the strap around your neck when you are seated and awake and rest your elbow on pillows.

**MOVING YOUR ELBOW:** This is dependent on your procedure.

You will be placed in a splint during surgery. Your surgeon will remove the dressing and splint approximately 10 days after surgery and explain how to progress your range of motion. You may squeeze a ball with your arm in the splint to help decrease swelling in your hand. Elevation of your hand above your heart will also help decrease swelling.

**Distal Triceps Tendon Repair:** For the first 6 weeks avoid triceps flexion under your own power and pushing activities (such as pushing up out of a chair).

**Biceps Tendon Repair:** For the first 6 weeks avoid biceps flexion under your own power and the “dart thrower” motion.

### **ICE:**

Please note that with the dressings placed during surgery, you may notice decreased benefit from the ice. Use as needed and if you notice benefit. Ice is most helpful in the first 3 days after surgery, but can help up to 2 weeks after surgery. We do not recommend that you use heat, as this can increase swelling.

If you chose to purchase a commercial ice machine, please use it according to manufacturer’s recommendations.

If you chose not to purchase an ice machine, you may use a commercially available ice bag or fill a large plastic bag with ice and water. (Do not place a plastic bag directly on your skin, but place a towel on your elbow in between your skin and the ice bag.) You can ice your elbow 20 minutes on and 20 minutes off throughout the day. Do not ice your arm longer than 30 minutes at a time, as this can cause frost bite.

## **BANDAGES:**

Leave your dressing clean and dry and do not remove it prior to your postoperative clinic visit. Your surgeon will remove the dressing and discuss wound care at that time.

## **MEDICATIONS:**

Narcotic pain medicine (such as Percocet – oxycodone, Norco – hydrocodone, or Tylenol#3 - Codeine):

We will prescribe a different medication if you cannot take these. Take this AS NEEDED only. Do not take additional Tylenol (also called acetaminophen) with these medicines, as they already have Tylenol in them. You may SUBSTITUTE Tylenol for a narcotic pill if you choose to. Be certain that you do not exceed the maximum Tylenol dose as noted on the Tylenol bottle.

Stool softener: Pain medicines often cause constipation. It is best to take most of this medicine with some food, as it can cause a little stomach upset.

Diclofenac: This anti-inflammatory may assist in pain control, but more importantly prevents your body from forming abnormal bone around the elbow as a result of surgery.

Zofran (ondansetron): You may take this medication if you are having nausea or vomiting. You may also take the Phenergan pill with a pain pill to increase the effectiveness of the pain pill if needed.

Robaxin (methocarbamol): This muscle relaxer may help with spasms experienced commonly after elbow surgery.

Please do not take NSAIDs such as Ibuprofen or Motrin, as these may slow healing of bone and tendon.

## **FOLLOW-UP APPOINTMENTS:**

You should have a **follow-up appointment** with your surgeon in about 2 weeks if you stay overnight in the hospital. If you do not stay in the hospital, you will have an additional visit with the Physician's Assistant within a few days of your surgery. Call (480) 964-2908 right away if you do not have an appointment already scheduled. We will check your incisions and remove any sutures at the 2-week visit. We will also answer any specific questions you may have about your surgery. We will consider getting you into Physical Therapy if this has not been arranged, as many patients benefit from PT after elbow surgery.

**CALL OUR OFFICE** at (480) 964-2908 with any urgent or emergent questions or concerns that you may have, or if you develop swelling in your leg with calf pain, swelling that will not go away when you elevate your leg, a temperature above 101.4, or drainage from your incisions.

If you experience any of these symptoms: go to an **Emergency Department** close to your house: High fever (above 102.5), chest pain, difficulty breathing, fainting, or bleeding.