

# Postoperative Instructions: UCL Reconstruction

# **POSTOPERATIVE MEDICATIONS**

- PAIN MEDICATIONS
  - Local anesthetics are injected into the wound and elbow joint at the time of surgery. This will wear off within 8-12 hours and it is not uncommon for patients to encounter more pain on the first or second day after surgery when swelling peaks. The following medications work together to ensure your pain is well controlled.
  - Acetaminophen (Tylenol) 500mg every 6 hours as needed (maximum of 3 grams per day)
  - <u>Meloxicam</u> (Mobic) 7.5 mg once daily for 30 days
    - This is an anti-inflammatory that you should take once daily with food
    - Do not take any additional NSAIDs such as Advil or Aleve while taking this medication
    - Do not take this medication if you are on another blood thinner
  - o <u>Oxycodone</u> 5 mg
    - After the block begins to wear off, you can take one to two tablets every four to six hours as needed for pain
    - Stagger with Acetaminophen to optimize pain relief.
    - The most frequent side effects of oxycodone include drowsiness, constipation, nausea, and itching. Do not drive or operate machinery while taking Oxycodone. Oxycodone can be habitforming and the minimum dose should be taken as infrequently as possible
    - On average, patients take opioid medication for 4-5 days following surgery.
- ANTI NAUSEA MEDICATION
  - <u>Zofran ODT 4 mg</u> (Ondansetron)
    - You can take one tablet every 6 hours as needed for nausea or vomiting (ONLY IF NEEDED)
- BLOOD THINNER
  - Aspirin 81mg
    - Take one tablet twice per day for 30 days, beginning the night of your surgery
    - This medication is used for its anti-platelet effect to help minimize the risk of blood clots
    - Do not take this medication if you are on another blood thinner
- GI PROPHYLAXIS
  - **Protonix** 40mg twice per day for 30 days
- ANTI-CONSTIPATION MEDICATIONS
  - Colace
    - Post-operative constipation can result due to a combination of inactivity, anesthesia, and pain medication. To help prevent this, you should increase your water and fiber intake. Physical activity such as walking will also help stimulate the bowels. If constipation persists, over-the-counter Milk of Magnesia and Miralax can be helpful.

#### Christopher M. Brusalis, MD

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### **WOUND CARE & BATHING**

#### • BANDAGE

- The operative elbow will be immobilized in a splint and sling following surgery. Please maintain the splint at all times until your first postoperative appointment 10-14 days following surgery.
- Please keep the splint clean and dry.
- The outer sling should be worn for 2 days postoperatively, then as needed for comfort, unless directed otherwise by Dr. Brusalis' team.
- It is normal for the elbow to bleed and swell following surgery. If blood soaks through the bandage, do not become alarmed, reinforce with additional dressing.
- BATHING
  - You may shower beginning after your first postoperative appointment to ensure that the operative splint remains dry. You may sponge bathe for the initial postoperative period.
  - Please do not submerge the incision in a bath, pool, or hot tub until the sutures are removed <u>and</u> the wound is healed.

#### SUTURES

• Absorbable sutures are most commonly used to close surgical incisions. If non-absorbable sutures are used, they will be removed at your first postoperative appointment in 10-14 days.

# **ACTIVITY INSTRUCTIONS**

- When sleeping or resting, inclined positions (ie: reclining chair) and a pillow under the forearm for support may provide better comfort.
- Do not engage in activities which increase pain/swelling.
- Avoid long periods of sitting or long distance traveling for 2 weeks.
- NO driving until instructed otherwise by physician and no driving while taking narcotics.
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable.

#### • ICE THERAPY

- Icing is very important in the initial post-operative period and should begin immediately after surgery.
- Use icing machine continuously or ice packs (if machine not prescribed) for 30 minutes every 2 hours daily until your first post-operative visit – remember to keep leg elevated to level of chest while icing.
- Do not place pad directly on skin make sure there is a barrier such as a t-shirt or towel
- You do not need to wake up in the middle of the night to change over the ice machine or icepacks unless you are uncomfortableUse consistently (apart from sleeping) for the first 2-3 days postoperatively, then as-needed

#### • DIET

- Stay hydrated
- Start with clear liquids and light foods (jello, soup, etc) and gradually introduce your regular diet.
- High fiber diet with extra fresh fruits and vegetables to help your body heal from surgery.

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# **AT-HOME EXERCISES**

- Begin finger flexion and extension on the first post-operative day to help decrease swelling.
- Formal physical therapy (PT) or occupational therapy (OT), depending on which rehabilitation center you attend, begins after your first postoperative appointment. A prescription and list of HSS rehabilitation centers has been provided to you in your surgical folder.

# **EMERGENCIES**

- When to contact our office immediately:
  - Fever > 101.5°F for at least 48 hours after surgery or chills
    - Fevers are not uncommon after surgery and usually are not a sign of an infection. If you experience a fever in the first five days, take Tylenol and continue to monitor your temperature. Please contact the office with any fever that occurs beyond five days post-operatively or continues despite Tylenol.
  - Excessive bleeding from incision(s) (a small amount of drainage is normal and expected)
  - Signs of infection of incision(s) excessive drainage that is soaking through your dressing (especially if it is pus-like), redness that is spreading out from the edges of your incision, or increased warmth around the surgical area.
  - Unrelenting pain despite taking medications as prescribed
- Consider going directly to the emergency room if you are experiencing any chest pain or difficulty breathing

# **CONTACT INFORMATION**

- Dr. Brusalis' Office
  - o Phone: 516-743-3036
  - Email: <u>DrBrusalisOffice@hss.edu</u>
- After Hours (Evening & Weekend)
  - If you have an emergency or need to contact the office after hours or over the weekend, call the office number (516)-743-3036 and you will be directed to an on-call HSS physician.

# **FOLLOW-UP**

- You will typically receive a call within 48 hours of surgery to check on your status.
- Your first postoperative visit has already been scheduled for \_\_\_\_/\_\_\_\_ at \_\_\_\_: \_\_\_\_ am / pm at:
  - o HSS Long Island 333 Earle Ovington Blvd, Uniondale, NY 11553
  - HSS Queens Office 176-60 Union Tpke Suite 190, Queens, NY 11366
  - HSS Manhattan 535 E 70th St, New York, NY 10021
- Please call our office at 516-743-3036 with any questions regarding your follow-up appointment.