

Post-op PATIENT Instructions: RADIAL HEAD REPLACEMENT

Dressing: A dressing has been applied to your elbow to absorb any fluid/blood. Also, a splint has been applied for soft tissue rest and protection and is to be worn for during the first 2 weeks following surgery until seen in the office. (Common instructions for splint/cast care have been attached to these instructions and should be followed). Soreness and bruising is expected for several days afterward.

Ice: Ice is a powerful anti-inflammatory. Icepacks/wraps will help to reduce swelling and pain. Use liberally (20-30 min./session).

Activity: Wear the elbow splint as directed below. Gripping the hand with an exercise ball and keeping the fingers elevated and pointed toward the ceiling decreases extremity swelling. Sleeping in a recliner with pillows behind the elbow may provide additional comfort. No driving until permission is given by your surgeon.

Pain: A narcotic (taken every 3-4hrs as needed for breakthrough pain) is given to control your pain. **Begin taking these pain medications when you BEGIN experiencing pain!** These meds can take 30-45 minutes to start “working”. You do not want to play “catch-up” by letting your pain get out of control. Nausea, drowsiness, and constipation are common side effects of narcotics. Adequate fluid intake and a stool softener obtained over the counter from your local pharmacy is recommended to minimize constipation. Call the office if you are unable to tolerate your medication.

Precautions: If you develop temperatures above 101.5°F (38.5°C), uncontrolled pain, marked redness, persistent/discharged drainage, or significant swelling. Call the office **(813)-684-2663**

Follow-up: If you do not already have an appointment scheduled, call the office as soon as possible to schedule your first post-op visit.

Special Instructions: _____ (Additionally, follow any indicated instructions below.)

Physical therapy: to begin **after** 1st office post-op visit (2 weeks following surgery).

Elbow splint/brace: follow attached “Cast Care” (**NO DRIVING WHILE IN BRACE!**)

† **Additional Instructions:**

SPLINT/CAST INFORMATION SHEET

INSTRUCTIONS:

A splint/cast has been applied to allow your injured arm to heal. Casts never feel completely comfortable. However, by controlling your swelling, pain, and stiffness with ice, elevation and medications your comfort can be maximized.

Swelling: Is controlled by use of ice and elevation. Holding the arm overhead or elevating the leg/arm **above the level of your heart** is recommended. Propping the arm on pillows can help.

Ice: Ice is a powerful anti-inflammatory that helps to control swelling and pain. Surrounding the cast with ice contained in a waterproof container wrapped in a towel is effective.

Stiffness: Early and frequent movement of the fingers helps to prevent swelling and discomfort. During arm casting, shoulder and elbow motion may diminish and should be worked on regularly.

CAST CARE:

- **Keep the cast dry!!**
 - Covering with a waterproof bag while showering or in damp areas is recommended.
 - Your cast is NOT waterproof!!
 - Getting the cast wet can result in severe skin damage.
 - If the cast is damp, dry you skin with a hair drier (cool setting) for 30 minutes.
 - Call the office immediately if your cast is soaked through or skin maceration occurs.
- **NEVER insert ANYTHING under the cast!!**
 - This may result in scratching of the skin and infection!
 - Over-the-counter Benadryl can decrease itching.
 - Chafing/irritation can be reduced by smoothing with a nail file and taping rough edges.

CALL THE OFFICE WITH:

- Unanswered questions/concerns about the cast.
- Severe, unexpected, or persistent pain
- Numbness/tingling of fingers since the cast was placed
- Persistent feeling of irritation under the cast
- Foul smelling odor from the cast
- Pus or blood from under the cast
- Fevers >101.5 F lasting longer than 24 hours
- Cast breakage.

RADIAL HEAD REPLACEMENT REHAB PROTOCOL

Week 0-6: Active motion only to limit heterotopic bone formation.
Limitations based on med/lat. Ligament competence

MEDIAL AND LATERAL COMPETENT:

- Splinted in full extension 24-48 hrs (For swelling considerations)
- AROM to tolerance
- Sling/brace at night

LATERAL INCOMPETENT:

- Braced w/ wrist pronated, elbow @ 90deg.
- OK to AROM in pronation x 6 weeks
- AVOID SUPINATION
- Supinate w/. elbow in extension ONLY

MEDIAL INCOMPETENT:

- Braced w/ wrist supinated, elbow @ 90deg.
- OK to AROM in supination x 6 weeks
- AVOID PRONATION
- Pronate w/. elbow at 90 deg. ONLY

MEDIAL AND LATERAL INCOMPETENT:

- Braced w/ wrist neutral, elbow @ 90deg.
- OK to AROM elbow with wrist in neutral x 6 weeks
- Pronate w/. elbow at 90 deg. ONLY

• Weeks 6-12: Gentle strengthening begins with light repetition.

• 3 Months +: Start increased strengthening. Return to full strength/activities averages 6 months.