

## **Post-op PATIENT Instructions: ELBOW ARTHROSCOPY**

**Dressing:** A dressing has been applied to your shoulder to absorb any fluid/blood. A small amount of blood on the dressing is to be expected. Begin dressing changes 24-48 hours following surgery. Remove the OR dressing, apply sterile gauze to the surgical site and re-tape. A small amount of soap/water or alcohol cleansing adjacent to the incisions is permitted with the first dressing change. Unless directed by your surgeon, **no salves, balms, or ointments to the incisions**. Band-Aids over the small incisions are recommended until they are completely sealed. Soreness and bruising is expected for several days afterward. **Showering is permitted 72 hours following surgery. Soaking the incisions should be avoided. No swimming pools/bathtubs/hot-tubs/beach water for 4 weeks or until cleared by your surgeon.**

**Ice:** Ice is a powerful anti-inflammatory. Cold compression (“ice machines”) are important to reducing pain and swelling. Use liberally (20-30 min./session) but protect the skin from direct contact (and frostbite).

**Activity:** Elbow, wrist and hand range of motion is encouraged and will help to reduce your swelling in the hand and wrist. Additionally, try to keep the finger and hand elevated toward the ceiling to minimize swelling as well. Bending the elbow as soon as you are comfortable (unless otherwise restricted) is also encouraged. However, no driving until permission is given by your surgeon.

**Pain:** A nerve block has been performed for immediate post-op pain control by the anesthesiologist. It typically “wears off” at about 8-12 hrs following surgery. **Begin taking pain medications as soon as you BEGIN to experience pain!** These meds can take 45-60 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 important to minimize constipation.** Call the office if you are unable to tolerate your medication.

**\*NARCOTIC MEDICATIONS ALONE WILL NOT PROVIDE COMPLETE PAIN RELIEF. COLD COMPRESSION (ICE MACHINES), TENS USE, AND REGULAR TYLENOL AND ANTI-INFLAMMATORIES (ALEVE/IBUPROFEN, IF MEDICALLY OK) ARE CRITICAL PARTS OF YOUR PAIN CONTROL PLAN. REQUEST FOR NARCOTIC REFILL WILL ONLY BE ACCEPTED DURING BUISNESS HOURS. PLEASE GIVE 24-48 HOURS FOR MEDICATION REFILL REQUESTS TO BE ADDRESSED\***

**Precautions:** Call the office (813)-754-1199 if you develop: temperatures >101°F, shortness of breath, chest pain, uncontrolled pain, marked redness/hives, persistent drainage, new onset numbness, significant incisional/calf swelling, or any other concerns. **Call 911 or report to the nearest emergency room with any concerns for medical emergencies**

---

**PT/OT PRESCRIPTION: ELBOW SCOPE REHAB PROTOCOL**

*(Revised 3.30.16)*

**MD Orders for the Therapist:**

- Physical Therapy/Occupational Therapy Prescription: 2-3 times per week x 6 weeks
- Follow this protocol without substitution. Contact my office with any questions.

---

Christopher T. Donaldson, MD

**Weeks 0 – 5:**

**Passive, Active assisted AND Active Shoulder Motion:**

- ADVANCE MOTION AND STRENGTHENING TO TOLERANCE
- Elbow, wrist and hand ROM; aggressive upper extremity edema control.
- Postural instructions to promote active scapular retraction.
- Scapular clock exercises
- Ice and pain modalities as indicated.
- Add strengthening to tolerance
  - Start isometrics, progress theraband, then free weights

**Weeks 6-greater:**

- Gradual return to normal activities

**Precautions:** Call the office (813)-754-1199 if you develop: temperatures >101°F, shortness of breath, chest pain, uncontrolled pain, marked redness/hives, persistent drainage, new onset numbness, significant incisional/calf swelling, or any other concerns. **Call 911 or report to the nearest emergency room with any concerns for medical emergencies**