



P: (843) 353-3460 | F: (843) 353-3461

Tennis Elbow Postoperative Instructions

Diet

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

Wound Care

- Maintain your operative dressing, loosen bandage if swelling of the wrist or hand occurs
- It is normal for the elbow to bleed and swell following surgery – if blood soaks onto the bandage, do not become alarmed – reinforce with additional dressing
- Remove surgical dressing on the 2nd post-operative day – if minimal drainage is present, apply a clean dressing over incisions and change daily
- To avoid infection, keep surgical incisions clean and dry – you may shower starting the day after surgery if you seal the surgical site with plastic around the ACE. Once surgical dressing has been removed, place waterproof Band-Aids over incision and change daily. NO immersion of operative arm (i.e. bath)

Medications

- Pain medication is injected into the wound during surgery – this will wear off within 8-12 hours
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per the directions on the bottle
- Primary Medication = (Oxycodone)
 - 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
 - Ondansetron (Zofran) take as needed for nausea
 - Docusate sodium (Colace) as needed for constipation
 - Meloxicam two times a day for 2 weeks
 - Tylenol 1000mg three times a day for two weeks
- 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
- Do not drive a car or operate machinery while taking the narcotic medication

Activity

- Elevate the operative arm to chest level whenever possible to decrease swelling
- When sleeping or resting, inclined positions (i.e. reclining chair) and a pillow under the forearm for support may provide better comfort
- Do not engage in activities which increase pain/swelling (lifting or any repetitive wrist/elbow/shoulder movements) over the first 7-10 days following surgery
- Avoid long periods of sitting (without arm elevated) or long distance traveling for 2 weeks
- NO driving until instructed otherwise by physician
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable
- Formal physical therapy typically begins 7-10 days postoperatively. Please call your therapy location of choice to schedule appointments 2-3 days after surgery.

Immobilizer

- Your sling should be worn for comfort and removed for exercise and hygiene
- You may remove for gentle range of motion of your shoulder, elbow, wrist, and hand

Ice Therapy

- Begin immediately after surgery
- Use icing machine continuously or ice packs (if machine not prescribed) every 2 hours for 20 minutes daily until your first post-operative visit – remember to keep arm elevated to level of chest while icing

Exercise

- Gentle shoulder, elbow, wrist, and hand range of motion exercises can be performed beginning on the first post-operative day
- Formal physical therapy (PT) will begin about 7-10 days post-operatively. Contact your physical therapy location of choice (2-3 days after surgery) to begin scheduling appointments.

Emergencies

- Contact Dr. Gehrman or his clinical assistant at (843) 353-3460 if any of the following are present:
 - Painful swelling or numbness
 - Unrelenting pain
 - Fever (over 101°F - it is normal to have a low grade fever 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
- **If you have an emergency after office hours or on the weekend, contact the same office number 843-353-3460 and you will be connected to our page service – they will contact Dr. Gehrman or one of his colleagues if he is unavailable. Do NOT call the hospital or surgical center.
- **If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

Follow Up Care + Questions

- A member of Dr. Gehrman's team will call you 24 to 48 hours after surgery to address any questions or concerns. If you have not been contacted within 48 hours of surgery, please call the office at 843-353-3460.
- Typically the first post-operative appointment following surgery is 10-14 days following surgery.
- If you do not already have a postoperative appointment scheduled, please contact the office during normal office hours (843-353-3460) and ask for appointment scheduling.
- The first post-operative appointment will be with myself or one of the Physician Assistants. They will assess the wound, go over post-operative protocol, and answer any questions you may have regarding the procedure.

Lateral Epicondylitis PT Protocol

Name: _____ Date: _____

Diagnosis: _____

Date of Surgery _____

Frequency: 1 2 3 4 times/week

Duration: 1 2 3 4 5 6 Weeks

Week 1:

- Wear sling for comfort
- Gentle hand, wrist and elbow ROM as tolerated
- Active shoulder ROM
- Heat before, and ice after

Weeks 2-4:

- Remove sling
- Advance ROM passive motion as tolerated to AAROM
- Gentle strengthening exercises with active motion and submaximal isometrics
- Continue shoulder Strengthening and ROM

Weeks 5-7:

- Advance strengthening as tolerated, including weights and tubing
- ROM with continued emphasis on end-range and passive overpressure
- Gentle massage along and against fiber orientation
- Counterforce bracing

Weeks 8-12:

- Continue counterforce bracing if needed
- Begin task-specific functional training
- Return to sport or activities