

E. Edward Khalfayan, M.D.
Post-Operative Instructions Following Elbow Surgery

After General Anesthesia

1. Do not drive, operate machinery, consume alcohol, tranquilizers or sign legal documents for 24 hours or as long as you are taking narcotic pain medication.
2. Do not plan on going to work or school today, go home and rest.
3. Begin with clear fluids and light foods and then progress your diet as tolerated. It is usually best to avoid heavy, greasy or spicy food the day of surgery.
4. Narcotics cause constipation, so increase the amount of fluids you drink along with fiber and fruit in your diet. Some over the counter medications to prevent or treat constipation are Metamucil, Citrucel, Colace, and DDS. You can also drink warm prune juice.
5. It is important to eat some food every time you take narcotic pain medications (even in the middle of the night). If you don't, you are more likely to have nausea. Usually a few crackers, some pudding, applesauce or a banana will suffice.
6. Some anesthetics can cause urinary retention. If you are having trouble emptying your bladder or have not urinated for eight hours after the anesthetic please call Dr. Khalfayan.
7. You can always reach Dr. Khalfayan - day or night by calling **206-386-2600**. After hours, the answering service will page Dr. Khalfayan.

Dressings and Incision care

1. Keep the dressings and incisions dry. Keep everything on until your first post-operative visit after your surgery unless instructed otherwise. You will usually start physical therapy after your first post-op visit.
2. You may shower with a cast bag (available at pharmacies) or a large plastic bag covering the entire elbow so that the dressings do not become wet. If the dressings become wet you may change them and apply sterile gauze and a new ace wrap.

Activity

1. Apply ice for 20 minutes every 1-2 hours while elevating the elbow above the heart to help with pain and swelling. Do not ice continuously.
2. Move the fingers as tolerated. Squeezing a rubber ball, putty, or a sponge several times daily is encouraged.
3. If you are not in a splint, you may remove the sling and move the elbow as much as tolerated unless instructed otherwise.
4. A CPM may be ordered to help with post-operative range of motion. If it has, you will be instructed on how to use it. It is important to use it as much as instructed.

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Medications

1. Once you are released from the surgery center, start taking the pain medication on a regular schedule. When the pain is well controlled, take the pain medication as needed.
2. It is best to take the pain medication at the earliest sign of pain instead of waiting for it to worsen. The medication works best if you ice and elevate to keep the swelling to a minimum.
3. If you are running low on your medication please contact Dr. Khalfayan Monday-Friday 9am -5pm at 206-386-2600, dial 0 and ask for his assistant, Devan. If you wait until the end of the day you may not get a refill that day. Please do not wait until Friday afternoon, as we may not be able to fill your prescription until Monday. Over the weekend, the on-call physician WILL NOT CALL IN MEDICATION REFILLS. Percocet cannot be called in to your pharmacy; you will need to have someone pick up a written prescription.
4. **DO NOT** take Aspirin or any anti-inflammatory medication (Ibuprofen, Motrin, Advil, Aleve or Naprosyn) unless specifically told by Dr. Khalfayan.

Symptoms to report immediately

1. Excessive bleeding or draining, especially bright red bleeding that soaks all the way through your dressing (a little bleeding or pinkish drainage is ok on the bandage).
2. Excessive swelling not relieved by resting, elevation and ice.
3. Excessive or unbearable pain (unable to sleep, eat or hold a conversation)
4. Itching accompanied by hives, welts or a rash, which may be an allergic reaction.
5. Flu-like symptoms (nausea, general body aches, chills, or a temperature over 101 degrees) for longer than 24 hours may be a sign of infection.
6. Calf pain
7. If you experience shortness of breath or chest pain **CALL 911**