

Post-Operative Instructions:

Removal of Upper Extremity Hardware

Diet:

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

Wound Care:

- Maintain your operative dressing, loosen bandages if swelling of the elbow, wrist, or hands occurs.
- It is normal for your incision to bleed and swell from your surgery- if blood soaks through your bandage, do not become alarmed – reinforce with additional dressing.
- Do not remove your surgical dressing, it will be removed at your first post-op visit- Should the dressing fall off or get soaked, apply a new clean and dry dressing.
- To avoid infection, keep your incision clean and dry – you may shower as your dressing is water proof– NO immersion of the operative arm in water (i.e. bath)

Medications:

- Pain medications were injected into your wound and knee during the surgery – this will wean off in 8-12 hours.
- Pain medications given act on different pain receptors – these should be taken as directed on the bottle starting the day of your surgery until they are gone, with one exception: Oxycodone should only be taken if the other medications are not relieving your pain.
- Primary Medications:
 - 1. Acetaminophen (Tylenol) 1 g PO every 8 hours scheduled [Rx for 90 (500 mg) tablets]
 - 2. Tramadol (Ultram) 100 mg PO every 8 hours scheduled [Rx for 30 (50 mg) tablets]
 - 3. Meloxicam (Mobic) 15mg PO daily [Rx for 5 (15mg) tablets]
 - a. Alternative: Celecoxib1 (Celebrex) 200 mg PO every 12 hours as scheduled [Rx for 10 (200mg) tablets]

----- Take medications above as scheduled until they are gone-----

- 5. Oxycodone (OxyIR) 5 mg (1-2 pills) PO every 4 hours as needed (only as needed) [Rx for 30 (5mg) tablets] - Only take this medication if the other scheduled pain medications are not adequately controlling your pain.
- Common side effects of Oxycodone pain medication include nausea, drowsiness, constipation – to decrease these side effects, take with food – if constipation occurs, consider taking an over the counter laxative.
- If you are having a problem with nausea and vomiting please take one of your anti-nausea medications – Zofran. If still having issues please call our office for a possible medication change.

Activity:

- Do not engage in activities which increase pain and swelling over the first 7-10 days after your surgery.
- Avoid long periods of sitting (without your arm supported) or long distance traveling for 2 weeks.
- May return to sedentary work or school if pain is tolerable and you are not on opiate pain medications.

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- You may range your elbow from full extension to flexion of 90 degrees.
- No contact sports until cleared by Dr. Keller

Ice Therapy:

- Begin immediately after surgery
- Use Ice every 2 hours for 20 minutes daily until your first post-operative visit

Exercise:

- Begin simple range of motion of your shoulder, elbow, wrist, and hand.
- Formal physical therapy (PT) maybe prescribed later, but most people do not require formal PT.

Emergencies:

- Contact Dr. Keller if any are present:
 - Painful swelling or numbness
 - Unrelenting pain
 - Fever (>101) or chills. It is normal to have a low-grade fever after surgery.
 - Redness around the incision
 - Color change in the wrist or hand
 - Continuous draining/bleeding from the incision (small amounts are completely normal)
 - Difficulty Breathing
 - Excessive nausea.

***If you have an emergency please contact Dr. Keller before going to a hospital or emergency room.

Follow-up Care/Questions:

- Please contact Katharyn Chernicky, Dr. Keller's assistant at 248-659-0190. OR email Dr. Keller at RKeller@DL-Ortho.com.
- If you do not already have a post-operative appointment, please call and schedule by calling 248-650-2400 and asking for appointment scheduling.