





Robert A. Keller, MD


Sports Medicine and Arthroscopic Surgery
Orthopedic Surgeon



 Book an Appointment

 Hickory: (828) 322-5172

 Lincolnton: (704) 732-4064

 Boone: (828) 264-1100

 kellersportsmed@gmail.com

Post-Operative Instructions

Ulnar Nerve Transposition

Medications

Wound Care

Activity

Shoulder Immobilizer

Contact Information

Medications

- After your surgery and as you begin your medication regimen, start with clear liquids and light foods (jello, soup, etc). If you are not nauseated, you may progress to your normal diet.
- A pain catheter may have been placed into your shoulder before your surgery. This can wear off in 8-12 hours or can last for a few days. **You cannot shower until your pain catheter is removed.**
- The pain medications you were 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. You will find an attached medication calendar to follow as an example.
- Primary Medications:
 - 1. **Acetaminophen (Tylenol) 1,000mg:** Take (2) 500mg tablets every 8 hours scheduled [Rx for 60 (500mg) tablets]
 - 2. **Tramadol (Ultram) 50mg:** Take one tablet every 8 hours scheduled [Rx for 15 (50mg) tablets]
 - 3. **Diclofenac 75mg:** Take one tablet twice a day scheduled [Rx for 30 (75mg) tablets]
 - Alternative: Meloxicam (Mobic) 15mg daily [Rx for 15 (15mg) tablets]
 - 4. **Gabapentin (Neurontin) 200mg:** Take (2) 100mg tablets every 8 hours scheduled [Rx for 30 (100mg) tablets]
----- *Take medications above as scheduled until they are gone*-----
 - 5. **Oxycodone 5 mg:** Take 1-2 tablets every 4 hours as needed [Rx for 10 (5mg) tablets]
 - **Only take this medication if the other scheduled pain medications are not adequately controlling your pain.**
- Common side effects of Oxycodone include nausea, drowsiness and 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 you are still having issues, please call our office for a possible medication change.

Wound Care

- Maintain your operative dressing until your first post-operative appointment.
- **Your dressing is waterproof, therefore you can shower with it on.** Do not take a bath or submerge your wounds in water until Dr. Keller lets you know that it is OK.

Activity

Shoulder Immobilizer:

- Your shoulder immobilizer should be worn at all times until further instructed by Dr. Keller.

General Activity:

- When sleeping or resting, inclined positions (recliner chair) with pillows behind the shoulder or under the forearm for support may provide better comfort.
- No driving until instructed by Dr. Keller.

Elevation/Ice Therapy:

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

Contact Information

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 toes or feet
 - 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:

- If you do not already have a post-operative appointment, please call and make an appointment 7-10 days after surgery.
- Surgical Coordinators/Administrative Assistants:
 - **Loretta Atkinson – (828)- 624-1631**

For post-operative questions and concerns, please contact the office at:

- **Hickory: (828)-322-5272**
- **Lincolnton: (704) 732- 4064**
- **Boone: (828)-264-1100**
- **Dr. Keller – kellersportsmed@gmail.com**



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Post-Operative Medication Schedule

<u>Surgery</u>	<u>Day #1</u>	<u>Day #2</u>	<u>Day #3</u>	<u>Day #4</u>	<u>Day #5</u>	<u>Day #6</u>
<p>AM Surgery!</p> <p>PM Tylenol 1,000mg Tramadol 50mg Diclofenac 75mg Gabapentin 200mg <i>(Oxycodone if needed)</i></p>	<p>Breakfast Tylenol 1,000mg Tramadol 50mg Diclofenac 75mg Gabapentin 200mg <i>(Oxycodone if needed)</i></p> <p>Lunch Tylenol 1,000mg Tramadol 50mg Gabapentin 200mg <i>(Oxycodone if needed)</i></p> <p>Dinner Tylenol 1,000mg Tramadol 50mg Diclofenac 75mg Gabapentin 200mg <i>(Oxycodone if needed)</i></p>	<p>Breakfast Tylenol 1,000mg Tramadol 50mg Diclofenac 75mg Gabapentin 200mg <i>(Oxycodone if needed)</i></p> <p>Lunch Tylenol 1,000mg Tramadol 50mg Gabapentin 200mg <i>(Oxycodone if needed)</i></p> <p>Dinner Tylenol 1,000mg Tramadol 50mg Diclofenac 75mg Gabapentin 200mg <i>(Oxycodone if needed)</i></p>	<p>Breakfast Tylenol 1,000mg Tramadol 50mg Diclofenac 75mg Gabapentin 200mg <i>(Oxycodone if needed)</i></p> <p>Lunch Tylenol 1,000mg Tramadol 50mg Gabapentin 200mg <i>(Oxycodone if needed)</i></p> <p>Dinner Tylenol 1,000mg Tramadol 50mg Diclofenac 75mg Gabapentin 200mg <i>(Oxycodone if needed)</i></p>	<p>Breakfast Tylenol 1,000mg Diclofenac 75mg <i>(Tramadol & Gabapentin if needed)</i></p> <p>Lunch Tylenol 1,000mg <i>(Tramadol & Gabapentin if needed)</i></p> <p>Dinner Tylenol 1,000mg Diclofenac 75mg <i>(Tramadol & Gabapentin if needed)</i></p>	<p>Breakfast Tylenol 1,000mg Diclofenac 75mg <i>(Tramadol & Gabapentin if needed)</i></p> <p>Lunch Tylenol 1,000mg <i>(Tramadol & Gabapentin if needed)</i></p> <p>Dinner Tylenol 1,000mg Diclofenac 75mg <i>(Tramadol & Gabapentin if needed)</i></p>	<p>AM Tylenol 1,000mg Diclofenac 75mg</p> <p>PM Tylenol 1,000mg Diclofenac 75mg</p>
			<p>*If pain is controlled, discontinue Tramadol & Gabapentin</p>			<p>Starting Day #7, continue Tylenol and Diclofenac until you run out of medication</p>