

RICHARD A. MCCORMACK, M.D.

5500 Merrick Road, Massapequa, NY 11758 *(516) 795-3033* 2103 Deer Park Avenue, Deer Park, NY 11729 *(516) 795-3033*

2201 Hempstead Tpke, Suite 668, East Meadow, NY 11554 *(516) 572-5759*

Post-Operative Instructions:

Lateral epicondylitis – extensor tendon debridement / repair

Activity

- A large, bulky bandage/splint has been placed on your elbow, wrist, and hand and is designed to minimize swelling (and should feel "snug").
- Elevate the arm at all times to help reduce swelling and pain. Using several pillows, maintain the arm above chest level especially when sitting & sleeping at night.
- You may apply ice packs to your hand and digits to help with pain and swelling as well (20-30 minutes four times per day).
- Wiggle your fingers regularly. Open and close your fist to maintain flexibility and motion. You may use your opposite hand to assist in these exercises.
- No resistive palm down lifting (> 5 lbs) or strengthening is allowed for the first 4 weeks. Progression will be determined on an individual basis
- Return to (sedentary) work or school a few days after surgery if pain is tolerable. Returning to heavy labor or excessive lifting or reaching work will be determined by the Dr. McCormack.
- Do not drive during the initial 1-2 weeks as you may be taking narcotic pain medication.

Pain Medicine

- It is common to have post-surgical pain for the first week or two after your operation.
- Your pain medication prescribed for you (Percocet) should be started immediately after your surgery. You may take one or two tablets every four hours as needed for pain.
- It is strongly recommended that you take your pain medication regularly for the first two to three days after surgery (even if your pain is mild) in order to avoid rebound pain. Then wean yourself to an "as needed" dosing regimen.
- Take your anti-inflammatory (Celebrex) medication as needed with food for the first 3 weeks after surgery. Discontinue use if you experience significant stomach pain.
- If you have any side effects from a medication, discontinue its use and call our office.



Physical Therapy

• Formal therapy may be required to restore elbow motion and function and will be determined by Dr. McCormack on your follow up office visit.

Dressings

- Do not change or remove the bandage/splint. If you are experiencing significant pain and feel that the bandage is too tight, you may gently loosen the operative dressing by unwrapping and rewrapping the outside ACE bandage at any given time.
- Keep the bandage/splint clean and dry. Use a plastic bag to cover the arm when showering. Surgical supply stores carry such plastic wraps for keeping an extremity dry after surgery.
- You may develop bruising around your forearm and elbow. Do not be alarmed; this is normal following surgery.

Follow Up

- Please schedule an office appointment for the day after surgery or for the following week.
- At that time your bandage/splint will be removed and you will begin gentle motion exercises of the wrist and elbow.
- Your wrist will be placed in a metal brace, please wear for 4 weeks (1st week full time, then only when in public the last week) in order to protect the surgical reconstruction.
- Call the office immediately if you develop a fever (101.5), chills, significant arm swelling, redness, tenderness, or excess incision drainage.
- If you have any questions or concerns please feel free to call the office