

**Dr. Friedman's Post-Operative Instructions:**  
*Distal Biceps Surgery*

**Immediate Post-Operative**

- You should wear your sling at **ALL** times. You should do exercises to move your **ELBOW, WRIST, and FINGERS** at least 3 times per day starting immediately after surgery, but avoid any motion of your shoulder.
- Use ice packs on the surgical site 20 minutes per hour while awake to decrease swelling and diminish pain.
- It can be helpful to sleep with a pillow under the arm that had surgery for comfort

**Post-Operative Day 5 (5th Day after surgery)**

- Keep your surgical dressings clean and dry. On post-operative day #5 you can shower – remove the sling carefully and the surgical dressings. Do not try to lift the surgical arm over your head. Pat dry the incisions after you shower and cover them with Band-Aids.
- Do not put any creams or antibiotic agents on the wounds.
- You can lift your arm gently to apply underarm deodorant.
- Put your arm back in the sling gently following your shower.

**Post-operative Days 5-10 (1<sup>st</sup> Post-operative visit)**

- Continue as above.
- You will have your 1<sup>st</sup> post-operative visit somewhere in this time period (5-10 days after surgery).
- At that visit we will inspect your wounds and remove the sutures (stitches) in your shoulder.
- You will be given your 1<sup>st</sup> post-operative prescription to start Physical Therapy with all of the guidelines for your therapist to follow.

## When to call the Office

If you do not already have a post-operative follow-up appointment, please call the appointment desk at (209) 946-7200 in the first day or two after surgery to schedule a post-operative visit with Dr. Friedman. Your appointment should be **5-10 days after surgery**.

### **Please call if any of the following are present:**

- Unrelenting pain
- Fever or chills, fever of  $>101.5$
- Excessive nausea/vomiting due to pain medication
- Continuous drainage or bleeding from the dressings
- Increasing swelling or persistent numbness or tingling in the hand/fingers
- Color change in the fingers. Your fingers should be pink and warm.
- Extreme pain on the back of the calf, shortness of breath, or chest pain which may be warning signs of a blood clot or pulmonary embolus. If symptoms are severe, dial 9-1-1
- ANY other worrisome condition
- Please do not hesitate to contact us with ANY questions that arise at (209) 946-7213.

**POST-OPERATIVE EXERCISES: START POST-OPERATIVE DAY 1 or 2:**

1. Scapular retraction and shrugs: Begin this exercise by standing straight. Pinch your shoulder blades together and hold them for 10 seconds. Then relax and repeat the exercise again. Repeat this motion 30 times, three times a day. Also shrug your shoulders 10 times three times a day. These exercises strengthen the muscles around your shoulder blade and allows your shoulder to move more effectively.
2. Ball Squeezes: Begin this exercise by making a tight fist or by gripping a rubber ball. Hold this position for 10 seconds and then release. Repeat this exercise 20-30 times, three times a day. This exercise works your hand and helps prevent blood clots.

## General Medication Instructions After Surgery

You will receive multiple prescriptions before or at the time of surgery, typically including:

1. Narcotic (i.e. Norco). A narcotic is a strong pain medication that blocks the sensation of pain. Once your pain decreases, discontinue the use of this medication as it can be addictive. This medication typically helps with pain, but also causes drowsiness, constipation, nausea, and itching. Avoid combining this medication with Tylenol. Drink plenty of water to help decrease the risk of constipation.
2. Non-steroidal Anti-inflammatory Drug/NSAID (i.e. Meloxicam, Naproxen). This decreases the inflammation and swelling after surgery. This will help with mild pain associated with surgery and also to help with inflammation and swelling. Use this medication as directed. Take with food. Speak with your doctor if you have a history of heartburn, ulcers, or heart issues.
3. Stool softener (i.e. Colace). A stool softener is often necessary while taking narcotic medication to help with constipation. Use this medication while taking the prescribed narcotic medication.

4. Anti-nausea medication (i.e. Zofran, compazine). Anesthesia and narcotics can cause significant nausea in the first 24-48 hours after surgery. Take the anti-nausea medication as needed to help with these symptoms.
5. Aspirin. Take aspirin as directed to help prevent blood clots.
6. Gabapentin. This is another medication that helps to reduce pain after surgery. Take three times a day for 5 days, two times a day for 2 days, and once a day for 2 days. This medication may cause drowsiness.

## **RECOMMENDATIONS FOR PAIN CONTROL AFTER SURGERY**

Many patients will receive a nerve block to help with pain control during and immediately after surgery. This temporarily causes numbness and difficulty moving the affected limb. There will be some pain after the nerve block wears off. Pain is typically worst the first few days following surgery.

Starting after surgery and **BEFORE** your nerve block wears off, follow the following pain medicine regimen for the first 24-48 hours after surgery:

One or two narcotic (pain) pills approximately every 4 hours. The day after surgery, some patients may need to take 2 pills every 4 hours for pain relief. If taking 2 pills every 4 hours initially, you should be able to decrease the dose to 1 pill every 4 hours after 48 hours or so. Begin spreading out the time interval between narcotic doses as tolerated. Many patients are completely off their narcotics by the first post-operative visit.

**WEAN** off the narcotics, ie, take one pain pill every 6 hours, then 8 hours, then 12 hours, then discontinue.

Use plenty of ice to help reduce inflammation and pain. Do not use ice for more than 20 minutes at a time to prevent frostbite.