

Orthopaedic and Spine Institute
21 Spurs Lane, Suite 245, San Antonio, TX 78240
www.saspine.com
Tel# 210-487-7463
Joel B. Nilsson, M.D., P.A.

***POST-OP INSTRUCTIONS FOR PATIENTS WHO HAVE HAD
ENDOSCOPIC ULNAR NERVE DECOMPRESSION SURGERY***

Dressing: A compressive dressing has been applied to your incision. The elastic wrap should be removed 5 days after surgery and elbow motion continued. Prior to removal, the elastic bandage may be loosened as needed if too tight.

Wounds: The wound is closed using absorbable stitches. Also, there may be yellow xeroform gauze or adhesive strips over your incision to enhance healing. You may begin showering and getting the incision wet in the shower once the dressing is removed.

Activity: After removal of the dressing, gentle motion of the elbow is recommended. No strengthening or vigorous use of the arm until cleared by one of our clinicians.

Exercises: Remember to move your shoulder and elbow 3-4 times a day to keep them loose. You may raise your arm above your head to stretch your shoulder and move your elbow back and forth as much as your dressing will allow. You are encouraged to gently move your fingers as much as your dressing will allow unless otherwise directed by your surgeon.

Bathing: Keep your wound clean and dry. Do not allow your incision to get wet until 5 days when the dressing is removed.

Pain: Upon discharge from the hospital you should have a prescription for pain medication. Please take the pain medication with

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food. Do not drink alcoholic beverages or drive if your are using pain medications.

Precautions: If you develop a fever (temperature greater than 101 degrees Fahrenheit or 38.3 Celsius) or chills, or any undue symptoms such as unexpected pain, redness, swelling in either leg, rash, blisters, numbness, tingling, itching, hives or shortness of breath, please contact our office. Problems following this type of surgery have been minimal; however, if you have a problem or question, do not hesitate to call the office at 210-487-7463. The answering service will handle your call to the office after hours or on the weekend, and one of the Orthopaedic and Spine Institute clinicians will return your call. **If you have an emergency, call 911.**

If you had regional anesthesia (block), especially of the arm, the anesthesia or numbness may persist for sometime. Special care should be taken against such injuries as burns from hot surfaces and cuts from knives until sensation has returned.

Diet: Start with light meals, progress diet as tolerated.