



Home to the Texas Rangers



Texas Metroplex Institute for
Sports Medicine & Orthopedic Surgery



Home to the Dallas Stars

Elbow, Wrist, or Hand Surgery Information

Surgeon: Steven Niedermeier MD

PRE-OPERATIVE APPOINTMENT:

- We will explain your surgery, answer any final questions, review your health history, and give you your post-operative medications.
- FEMALES: You may leave your nail polish on as your hand is fully covered for the procedures.
- All patients will receive a dose of antibiotics through their IV prior to the procedure. We do not prescribe any oral antibiotics prior to or following the procedure.

WHAT TO WEAR TO SURGERY:

- Something loose and comfortable should be available to wear after the surgery. Button up shirts are sometimes easiest.
- All street clothes will be removed and you will be placed in a surgical gown for the procedure.
- The nurses/therapists in the hospital will help you and show you how to get dressed without using your surgical arm after the procedure.
- *Helpful Tip* - it is easiest to put a shirt or jacket on the operative arm first

SPLINT/SLING:

- Depending on your procedure, you will be placed into a soft dressing or a splint. Sometimes a sling will be provided to you, as splints can occasionally be heavy. This sling is fully adjustable and should be worn at approximately the belly-button level.
- It is crucial to your post-operative recovery to remain in your splint until removed at your first post-operative visit by Dr. Niedermeier. Even if you are not placed into a splint, keep your soft dressing dry and intact until instructed otherwise.

POST-OPERATIVE MEDICATIONS:

- We will provide you with prescriptions for pain medication (i.e. Tylenol, Ibuprofen, Norco, Oxycodone, etc.) and anti-nausea medication (i.e. Phenergan, Zofran, etc.) so that you can pick these up prior to your procedure in efforts to make your day of surgery less involved.
 - Tylenol (Acetaminophen) 500 mg every six (6) hours.
 - Motrin/Advil (Ibuprofen) 200-800 mg every six (6) hours.
- Alternating these two (2) medications often works better to improve discomfort than taking just one or the other. For example:
 - Taking 500 mg of Tylenol in the morning, then 200-800 mg of Motrin/Advil in the afternoon, and 500 mg of Tylenol again in the evening.
- If you have allergies to certain medications, know that certain medications do or do not work, get really nauseated with surgery and/or pain medication make sure to let us know this.
- We **cannot** call in pain medication after hours or on weekends. It is your responsibility to let us know if your pain is not adequately controlled with the regimen given or if you need a refill in an ample amount of time for us to get this sent to the pharmacy during business hours and before the weekend. Our on-call service is available for suggestions but not to call in additional or different pain medications.
- Federal regulations only allow us to provide you with a 10-day supply of pain medication. We are only in clinic on Mondays, Wednesday, and Fridays (half day). You **MUST** plan accordingly.



- All pain medication and anti-nausea medications are as needed. Do not take more than what is prescribed unless specifically instructed by a TMI provider.
- Ice is also a fantastic pain reliever. We recommend keeping ice on your operative shoulder as much as you can tolerate. We no longer require ice machines for the surgery as they are expensive and not covered by insurance. If you have one available or request one a prescription can be provided.
- We do not place you on antibiotics following the procedure
- You may restart all your home medications the day after surgery.

DRESSINGS AND WOUND CARE:

- As stated previously, your dressing will not be waterproof, so it is crucial to keep your surgical dressing dry and in place until removed by Dr. Niedermeier. You may cover your surgical bandage with a plastic bag, cast covers purchased through Amazon, or clingwrap.
- We do not allow incisions to get wet for 1-2 weeks in order to reduce the risk of infection. In addition, we do not want you submerging your incisions for the first 3-4 weeks (i.e. no bath tubs, pools, hot tubs, lakes, ect.)
- Once your incisions are fully healed (3-4 weeks after surgery), you can begin massaging vitamin E, Aquaphor, or Bio Oil into your incisions. Remember, it can take 1 full year for scar maturation, and everyone scars differently.

PAIN BLOCK:

- As an option for pain control depending on your procedure, anesthesia may place a pain block that provides excellent pain relief for the first 12-24 hours after surgery. While not as common, it can be normal to experience some numbness and tingling beyond the 24 hours. This is never a requirement, but simply an alternative treatment for some procedures to improve post-op pain control.
- Using Ultrasound, they inject numbing medication around the nerves in your neck that supply sensation to the entire arm.
- When you start to feel your fingers the block is starting to wear off, it is a good idea to start taking pain medication to keep it managed. Within 30 minutes or so after feeling your fingers the block is no longer as powerful.

EXERCISES AND PHYSICAL THERAPY:

- Depending on your procedure, Dr. Niedermeier will give you instructions on what range of motion is allowed. It will be okay for you to wiggle your fingers and elevate your surgical site on some occasions to assist with swelling reduction. In some cases, physical or occupation therapy will be consulted to assist you in your recovery. We will place an order from our office, and the therapy department will reach out to you to schedule this prior to your surgery date.
- At your first post-op appointment, we will confirm therapy is arranged, if it is necessary.

SLEEPING AFTER SURGERY:

- While sleeping will likely be affected after surgery, we recommend sleeping in whatever position is comfortable, whether this is a chair/recliner, in bed propped up with pillows, or lying flat. Ideally, elevate your operative extremity, if possible or allowed, to assist with swelling reduction.
- We recommend that you not sleep on your operative side for at least 4-6 weeks.

**DRIVING:**

- You are allowed to resume driving when two things occur:
 - You are no longer taking narcotic pain medication (Advil and Tylenol are allowed).
 - You feel safe operating a vehicle, while wearing a splint/sling.
- We recommend starting to drive on small, neighborhood streets that are less busy, then working your way up to driving on busier roads.
- Use your best judgement on when you feel truly ready, as you must feel strong and alert!

WHAT WILL MY ARM LOOK LIKE AFTER SURGERY:

- The elbow, forearm, and hand can swell significantly after the procedure. This is within our normal expectations and should not alarm you to see swelling.
- The exercises you are allowed to do after surgery help with this swelling, as well as giving it some time.
- It is also normal to experience bruising in the elbow, forearm, wrist, and hand.

WHEN TO CALL THE OFFICE:

- Fever above 101.5 consistently that is not relieved by over the counter NSAIDs (Advil, Tylenol, Aleve)
- Significant increased drainage or redness
- Pain not controlled by pain medication
- Any falls or injuries during the post-operative period

POST-OPERATIVE APPOINTMENTS:

- We like to see you in the office to check your incisions, monitor your progress, and remove some of your restrictions.
- Typical after the first follow up visit at 10-14 days, the following visits will be not be as frequent.