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Olecranon Fracture Open Reduction Internal Fixation Post-Operative Instructions

ACTIVITY

- Try and rest the first few days following surgery.
- Wear your sling for the first 2-3 days and then you may wean out of the sling as tolerated. You can move your shoulder as tolerated, however, you won't be able to move your elbow or wrist.
- You have been placed into a splint. It is important to keep the splint clean, dry, and intact until your first post-operative appointment. Absolutely no submerging of the splint under water.
- Do not lift any objects greater than 1 pound for the first 4-6 weeks
- Driving is not recommended for the first 2 weeks following surgery and contraindicated when taking narcotic pain medication.
- Return to (sedentary) work 3-4 days after surgery if pain is tolerable. Return to heavy labor will be determined by Dr. Murar.

DRESSINGS

- A large bulky compressive bandage/splint has been placed over your wrist. This dressing is designed to minimize swelling in the operative extremity (and should feel "snug").
- The splint is to be worn until your first post-operative visit.
- 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. Please do not remove the underlying white fluffy gauze.
- Keep your dressing/splint clean and dry until your first follow-up visit. If you wish to shower, plastic bags, saran wrap, and waterproof dressings can all be used to keep the area dry.

MEDICATION

- You have been prescribed one of the following **pain medications**:
 - Oxycodone – Please take 1-2 tabs every 4-6 hours as needed for pain.
 - Norco – Please take 1-2 tabs every 4-6 hours as needed for pain.
- In addition to narcotics it is advised that you take scheduled **NSAID (non steroidal anti-inflammatory)** and **Tylenol** (alternating) for the first five days and then as your pain gradually improves you will wean off the narcotics and take NSAID/Tylenol on an as needed basis. If you have been prescribed Celebrex do not take other NSAIDs (i.e. Advil/Aleve) in combination with this.
 - **Tylenol (Acetaminophen)** – take no more than 4,000 mg in a 24 hour period. Do not take if you have liver disease.
 - **Ibuprofen (Advil)** – take no more than 2,400 mg in a 24 hour period. Do not take if you have kidney disease, history of ulcers, or GI bleeds.
 - **Naproxen (Aleve)** – if you prefer this over the counter NSAID over Ibuprofen/Advil you may take this instead. **DO NOT TAKE BOTH IBUPROFEN & NAPROXEN** as this increases your risk for toxic side effects. Please take no more than 1,500 mg of Naproxen in a 24 hour period. Do not take if you have kidney disease, history of ulcers, or GI bleeds.
- ICE – Ice will not be able to penetrate the splint very well so you may forgo icing if you were placed into a splint after surgery. Icing will be more effective once your splint is removed after two weeks. You may experience finger/hand swelling and icing can be used on the hand to combat this.
- You may have been given a prescription for **enteric coated Aspirin 81 mg** which you should take twice daily with food to decrease the risk of post-operative blood clot formation.
- You have also been given a prescription for **Senokot** to take 2 tabs daily as needed for constipation. Sedation during surgery, narcotic medications, decreased fluid intake, and decreased activity all contribute to constipation. If you find that you are still constipated despite the Senokot medication, there are other over the counter medications that you can try: Miralax, Fleet enema, or bisacodyl suppository.
- If you have any side effects (i.e. Nausea, rash, difficulty breathing) from medication discontinue its use and call our office.

OCCUPATIONAL THERAPY

- If you have not already scheduled your occupational therapy appointments, please call 952-808-3000 to schedule. Make your first OT appointment for after your first post-operative appointment (typically 11-14 days after surgery). Schedule out appointments 1-2x/week for 3-4 weeks in advance.

FOLLOW UP

- You have likely already been scheduled for your first post-operative visit. If you have not received an appointment please contact the office to schedule an appointment for 10-14 days after your surgery.
- You will be seen by Dr. Murar's Physician Assistant – Katie Peterson. Your first post-operative visit will include a review of your intra-operative findings, x-rays, and to go over any questions you may have.
- The splint and sutures will also be removed at that time if necessary.

- Call the office immediately if you develop a fever (>101.4), chills, excessive incision drainage, calf pain, or persisting leg numbness.
- If you have any other questions or concerns please feel free to call the office.