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## DR. TYSKLIND'S POST-OPERATIVE INSTRUCTIONS

### **Contact Information:**

Sports medicine clinic: 317-948-2550.

Hours of operation are Monday-Friday 8:00a-4:30p EST

For EMERGENCY at night or on weekend

Page operator: 317-944-5000

Ask to speak with the pediatric orthopedic on-call resident

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### **Wound Care:**

- ☐ You may remove the dressing in 3 days BUT DO NOT REMOVE THE WHITE STERI-STRIPS THAT ARE ADHERENT TO THE SKIN. For larger wounds, a waterproof dressing (sterile gauze/Telfa + Tegaderm) may be reapplied prior to showers, but instead the steri strips can be patted dry and no waterproof dressing is needed. You may shower after 4 days. Do not soak, bathe, or swim until post-operative visit.
- ☐ Leave dressing on until post-operative visit. You may shower if you keep the dressing dry by covering with a bag.

### **Sutures:**

- ☐ Absorbable skin sutures were used, but there may be small suture 'tails' on either side of the STERI-STRIPS, which should be left alone.
- ☐ Nonabsorbable skin sutures were used. Suture removal will be at first post-operative visit (2 wks).

### **Ice:**

- ☐ A Polar Cube has been applied. Use it frequently during the first 6 weeks after surgery for compression and cold therapy. Use as needed after this.
- ☐ Apply ice packs frequently to the area during the first 6 weeks after surgery and then as needed.

### **Weight-Bearing**

- ☐ You are weight bearing as tolerated on your arm. Use pain as your guide for what is comfortable.
- ☐ You are NONWEIGHTBEARING on your operative arm. Please do not put weight through your arm.

### **Follow-Up Appointment:**

- ☐ Follow-up with Dr. Tysklind in 10-14 days. If you do not already have an appointment, call (317) 948-2550 to schedule one.
- ☐ Follow-up with Dr. Tysklind in \_\_\_\_\_ weeks.

### **Slings/Splints/Casts**

- ☐ You have been placed in a sling. Follow instructions as checked below:
  - ☐ Please keep the sling on at all times except for showering. You may sleep in your sling. You may loosen it to allow motion of the elbow/wrist/hand several times per day.
  - ☐ Sling is for comfort only. You may remove the sling daily for showering and gentle range of motion exercises as tolerated and as instructed.
- ☐ You have been placed into a splint or cast. Please keep the splint/cast on and do not remove it. Keep the splint/cast clean and dry and DO NOT GET IT WET.

### **Pain:**

- ☐ Your health care provider will give your child a prescription for pain medicine like **Oxycodone** when you leave the hospital. If you need a refill of this medication, please give **at least 3 day's notice**. We cannot call in a narcotics prescription to your

pharmacy. We must mail you the prescription. If you cannot wait 3 days, you may need to pick up the prescription from us.

- ☐ The prescription will say that your child may take pain medications every 4–6 hours. This is the maximum dose and rate. You do not need to keep giving pain medication this much. As your child begins to feel less pain, it is important to slowly lower the amount and/or rate you give the narcotics. This is called weaning off the medication. Your child will probably not need to take narcotics after 7–10 days.
- ☐ Use the medicine as prescribed and do not drive, drink alcohol, or perform duties that require concentration (i.e. school or work) or manual dexterity while on the narcotic medication. Make sure to eat prior to taking the pain medication to avoid nausea.
- ☐ We would like you to add **Tylenol** to your dose of oxycodone or in between doses. Please follow the dosing instructions on the Tylenol bottle so as not to exceed 3,000mg/day. Alternate with Ibuprofen (ex: Tylenol at 8, Ibuprofen at 11, Tylenol at 2, etc.)
  - 650mg Tylenol
  - 500mg Tylenol
  - 325mg Tylenol
- ☐ We would also like you to take an over the counter anti-inflammatory such as **Ibuprofen** (or Motrin or Advil or Naproxen or Aleve) for additional pain control if you do not have any contraindications to taking this medication (i.e. allergy to the medication, stomach ulcers, or kidney problems) and this is ok'd by your surgeon based on the type of surgery you had done. Alternate with Tylenol (ex: Tylenol at 8, Ibuprofen at 11, Tylenol at 2, etc.)
  - 600mg ibuprofen
  - 400mg ibuprofen
  - 300mg ibuprofen
- ☐ For the first 2 days post-operatively, we recommend setting an alarm to check your pain level every 4 hours, including overnight, to avoid getting behind on pain control and playing catch-up.

### **Swelling:**

Maximal swelling occurs during the first 24-48 hours after surgery. Elevate area to minimize.

### **Driving:**

You may resume driving when you have full control of your limbs and pain free.

### **Sports:**

Do not return to sports until you have discussed this on your first post-operative visit.

### **Therapy:**

- ☐ No formal physical therapy will be necessary.
- ☐ Formal physical therapy should be arranged to begin AS SOON AS POSSIBLE AFTER the first post-operative visit (either the day of or the day after. PLEASE SET UP AN APPT with physical therapy in advance (2-3 sessions/wk). The attached form with the bullet points is your prescription, so the PT facility will request it, BUT PLEASE KEEP A COPY AND BRING TO ALL APPOINTMENTS, so that progress/milestones can be discussed and timing of return to activities
- ☐ For the first two weeks until formal physical therapy, you may do the following exercises:
  - Shoulder Pendulum: From standing position bend from waist, let arm hang straight down, gently move arm in circular motion clockwise and counterclockwise x 10, 3 times daily.
  - If an exercise is very painful, stop doing it or do it within the limits of motion that is not painful.
  - Major therapy gains are not achieved during the first two weeks. This is mainly a recuperative period. Formal physical therapy will commence after your first post-operative visit.

**Additional Instructions:** \_\_\_\_\_

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R. Gunnar Tysklind, MD

Date