



## POSTOPERATIVE INSTRUCTIONS CAPITELLAR OSTEOCHONDRAL ALLOGRAFT TRANSPLANT

### DIET:

- Begin with clear liquids and light foods (jellos, soups, etc.)
- Progress to your normal diet if you are not nauseated

### WOUND CARE

- Maintain your operative dressing.
- Do NOT remove splint, Do NOT get splint wet

### MEDICATIONS

- The nerve block that was placed prior to surgery will wear off in 12-24 hours. You should start taking oral pain medication prior to this.
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle
- Primary Medication = Percocet (Oxycodone/Acetaminophen)  
Take 1 – 2 tablets every 4 – 6 hours as needed
- Max of 12 pills per day
- Plan on using it for 2 to 5 days, depending on level of pain
- Do NOT take additional Tylenol (Acetaminophen) while taking Percocet  
Common side effects of the pain medication are nausea, drowsiness, and constipation – to decrease the side effects, take medication with food.  
Zofran (Ondansetron) has already been called into your pharmacy for nausea if needed.  
If constipation occurs, consider taking an over-the-counter laxative such as Colace or Miralax.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed (843) 654-8868– ask for Nicole Fava, Dr. Haro's PA)
- Do not drive a car or operate machinery while taking the narcotic medication
- Ibuprofen 400-600mg (i.e-. Advil) may be taken in between the narcotic pain medication to help smooth out the post-operative 'peaks and valleys', reduce overall amount of pain medication required, and increase the time intervals between narcotic pain medication usage

### ACTIVITY

- When sleeping or resting, inclined positions (i.e. reclining chair) and a pillow under the

forearm for support may provide better comfort

- Do not engage in activities which increase pain/swelling (lifting or any repetitive above shoulder level activities) over the first 7-10 days following surgery
- NO driving until instructed otherwise by physician
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable and no use of operative arm.

#### **SPLINT/SLING**

- Do NOT remove splint.
- Wear sling at all times, including sleep

#### **\*\*Emergencies\*\***

- Contact Dr. Haro or Nicole Fava PA-C (843) 654-8868 or by email HaroPA@southeasternspine.com if any of the following are present:
  - Painful swelling or numbness
  - Unrelenting pain
  - Fever (over 101° – it is normal to have a low-grade fever for the first day or two following surgery) or chills
  - Redness around incisions
  - Color change in wrist, hand or lower extremity
  - Continuous drainage or bleeding from incision (a small amount of drainage is expected)
  - Difficulty breathing
  - Excessive nausea/vomiting
- \*\*If you have an emergency after office hours or on the weekend, call (843) 654-8868 and you will be connected to our on-call service. Do NOT call the Surgery Center or East Cooper Hospital.
- \*\*If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

#### **Follow-Up Care/Questions**

- Nicole Fava, PA-C (Dr. Haro's Physician Assistant) will call you on your first day after surgery to address any questions or concerns. If you have not been contacted within 48 hours of surgery, please email HaroPA@southeasternspine.com or call (843) 654-8868
- If you have additional questions that arise at any time, whether for Dr. Haro or Nicole, please send an email to HaroPA@southeasternspine.com or call (843)-654-8868
- If you do not already have a postoperative appointment scheduled, please contact the scheduling office during normal office hours call (843)-654-8868