



Cubital Tunnel Release and Nerve Transposition (Submuscular) Patient Postoperative Instructions Laith Al-Shihabi, MD

0-2 weeks

Pain medication:

- Use your prescription pain medication as needed to control pain.
- Begin taking pain medication before the local anesthetic around your surgery site wears off.
- Do not drive or operate machinery while taking narcotic/opioid pain medication
- Unless you cannot take them for other medical reasons, it is ok to use over-the-counter anti-inflammatory medication (e.g. Advil or Aleve) in addition to your prescription pain medication. Do not take tylenol as your prescription already contains this medication.

Post-op Dressings:

- Keep the dressings and splint in place until your postoperative visit.
- Elevation of the arm, along with ice on-and-off for 20 minutes at a time, will help with swelling and pain.
- It is ok to shower, but the dressings must stay clean and dry. Place waterproof covering over the dressings while bathing or showering (such as a heavy plastic bag that is sealed with Saran wrap).
- If the dressings get dirty, wet, or come apart please contact the office.

Motion:

- Start moving your hand and elbow as soon as possible.
- You can use your hand for light activity, such as eating, drinking, or using a computer.
- You do not have any lifting or carrying restrictions, but higher demand activities may cause surgical-site pain. Avoid prolonged pressure on the inside of your elbow. Perform activities as your symptoms allow.

2-6 weeks (First post-op visit)

Splint:

- The sutures and splint will be removed at your 2-week visit.
- You will be referred to hand therapy for a removable long-arm splint.
- You can begin gentle scar massage at 3 weeks after surgery.

Therapy:

- Therapy will be started for elbow range of motion starting at 3 weeks.
- Gentle active forearm and wrist motion will begin at 4 weeks.

6 -10 weeks (Second post-op visit)

Splint:

- Discontinue use of the splint at 6 weeks.

Therapy:

- Therapy will be continued with a focus on both active and passive elbow motion, along with forearm rotation.
- Strengthening can begin at 8 weeks after surgery.
- Transition to a home therapy program at 8 weeks.

10+ weeks (Third post-op visit)

Splint:

- No longer necessary.

Therapy:

- Continue strengthening as part of a home-based program.
- No further therapy is necessary unless discussed on a case-by-case basis.