

PATIENT INSTRUCTIONS

**Disclaimer: All care and recovery instructions are recommendations only.
Individual results may vary. Always consult your physician.**

1. Patient may drive.
2. Keep bandages and procedure area clean and dry for 3 days.
3. May apply ice for 20 minutes as needed for discomfort.
4. May take over the counter pain medication as directed by your doctor.
5. Avoid submerging area in water (*i.e. Swimming/Bathing*) for (5) days.
6. Contact or return to Dr.'s office as directed.

Immediately Contact Office:

- If area becomes Red or hot to touch.
- For increased pain or swelling.
- For drainage from site.

Contact: _____

SPECIFIC PATIENT INSTRUCTIONS

<input type="checkbox"/> Knee <ul style="list-style-type: none"> • Rest leg and foot today. • Use crutches or knee Immobilizer if available for (5) to (7) days. • Start daily general non-weight bearing range of motion exercises on 3rd day. • Light daily activity for (3) weeks, then progress as tolerated. • Typically, may begin sports-specific rehabilitation from (6) to (12) weeks. • Activity after (3) months to be determined by physician. 	<input type="checkbox"/> Achilles <ul style="list-style-type: none"> • Rest foot and ankle today. • Wear walking boot if available and as desired for up to (2) weeks. • Start daily general non-weight bearing range of motion exercises on 3rd day. • May begin stretching exercises as tolerated at (3) weeks. • If asymptomatic after (6) weeks, may resume activity as tolerated, subject to physician approval. 	<input type="checkbox"/> Plantar Fascia <ul style="list-style-type: none"> • Rest foot and ankle today. • Wear walking boot if available and as desired for up to (2) weeks. • Begin stretching exercises on the 3rd day. • If asymptomatic after (6) weeks, may resume activity as tolerated, subject to physician approval.
<input type="checkbox"/> Elbow <ul style="list-style-type: none"> • Rest arm and hand today. • Wear compressive sleeve for (3) to (5) days. • May resume nonrepetitive sedentary use of arm/hand in (3) days. • Light daily activity for (3) weeks, then progress as tolerated. • May begin stretching and eccentric exercise at (3) weeks. • NO lifting objects with arm/hand greater than (5) pounds for (6) weeks. • May gradually resume normal use of arm/hand at (6) weeks as tolerated and subject to physician approval. 	<input type="checkbox"/> Shoulder <ul style="list-style-type: none"> • Rest shoulder for first (3) days. • Passive pendulum exercise after (3) days. • Sling PRN. • No overhead lifting with shoulder greater than (5) pounds for (2) weeks. • Increased range of motion over time as tolerated. • May gradually resume normal use of shoulder at (8) weeks as tolerated and subject to physician approval. 	<input type="checkbox"/> Hip <ul style="list-style-type: none"> • Rest hip for first (3) days. • Ambulatory assistance PRN • Active hip abduction against gravity after (1) week. • May begin routine daily activities at (2) weeks. • May gradually resume use of hip at (6) weeks as tolerated and subject to physician approval.

*Please see back of page
For more details*

TENEX Post Procedure Instructions (ELBOW)

Bandaging

- Compression Dressing- Remove after 5 hours- Showering is OK once this is removed.
- Waterproof bandage- Stays on for 3 days- Ok to shower and get this wet.
- Steri-strips- Will fall off on their own- Ok to shower and get these wet.
- DO NOT SUBMERGE IN WATER (no bath or swimming pools)

Use of your arm

- Rest arm and hand on day of the procedure.
- Apply ice for 20 minutes as needed for discomfort
- Resume nonrepetitive sedentary use of arm/hand after 3 days
- Light non-repetitive activity for 3 weeks, then progress as tolerated
- May begin stretching and eccentric exercise at 3 weeks
- No lifting objects with arm/hand greater than 5 pounds for 6 weeks
- May gradually resume normal use of arm/hand at 6 weeks as tolerated.

If you have any further questions regarding these instructions, please call and speak with Dr. Sobel's Medical Assistant. 602-385-4160