Elbow Arthroscopy

Arthroscopy is a valuable test for evaluating the elbow joint. The elbow is the large joint between your upper arm (*humerus*) and your forearm (*radius* and *ulna*). Arthroscopy is a surgical technique which uses small *incisions* (cut by the surgeon) to insert a small telescope like instrument (*arthroscope*) and other tools into the joint. This allows the surgeon to look directly at the problem. The arthroscope then beams light into the joint and sends an image to a TV screen (monitor) much the same as a video camera. As your surgeon examines your elbow, he or she can also repair a number of problems found at the same time. Some times the surgery may have to be changed to an open surgery if the problems are severe enough that they cannot be corrected with just arthroscopy. This is usually a very safe surgery, but possible complications include:

- Damage to nerves or blood vessels.
- Excess bleeding.
- Blood clots.
- The possibility of infection.
- Rarely instrument failure.

This is most often performed as a same day surgery. This means you will not have to stay in the hospital overnight. Recovery from this surgery is also much faster than having an open procedure.

BEFORE SURGERY

- Stop all anti-inflammatory medications at least one week prior to surgery unless instructed otherwise. Let your surgeon know if you have been taking cortisone.
- Do not eat or drink after midnight, or as instructed. Take medications as your physician instructs. You may have lab tests the morning of surgery.
- You should be present one hour prior to your procedure unless otherwise directed by your caregiver. Check in at the admissions desk for filling out necessary forms if not preregistered. There may be consent forms to sign prior to the procedure. Should friends or family accompany you, there is a waiting area available for them while you are having your procedure.

LET YOUR PHYSICIAN KNOW ABOUT THE FOLLOWING:

- Allergies.
- Medications taken including herbs, eye drops, over the counter medications, and creams.
- Use of steroids (by mouth or creams).
- Previous problems with anesthetics or novocaine.
- Possibility of pregnancy, if this applies.
- History of blood clots (thrombophlebitis).
- History of bleeding or blood problems.
- Previous surgery.
- Other health problems.

PROCEDURE

You may have a general anesthetic during which you are sleeping during the procedure. You may have a local anesthetic in which just the part being worked on is numb. Your surgeon, anesthesiologist or anesthetist will discuss this with you. Some of the most commonly encountered problems in the elbow joint area are loose bodies in which bone or cartilage pieces within the joint have broken loose. There may be bone spurs in which small boney over growths cause pain and limitation of movement. Sometimes a piece of bone may become loose because of injury to its blood supply. This is called OCD (osteochondrochondritis dissicans). There may be ligament tears or damage to the cartilage. Ligamentous tears may have to be repaired with an open procedure. Cartilage tears may be shaved off or loose pieces of cartilage removed.

AFTER YOUR PROCEDURE

- After surgery, you will be taken to the recovery area where a nurse will watch and check your progress. Once you're awake, stable, and taking fluids well, barring other problems you will be allowed to go home.
- Once home, an ice pack applied to your operative site for twenty minutes, three to four times per day, for two to three days, may help with discomfort and keep the swelling down.
- Use medications as prescribed.
- Do range of motion exercises with elbow as directed.

- Keep your elbow elevated and wrapped to keep swelling down and to decrease pain. This also speeds healing.

REHABILITATION

- Elbows are often swollen, stiff, and painful following surgery. The recovery time will vary with the procedure done. Splints, casts or bandages will be worn for various amounts of time.
- If physical therapy and exercises are prescribed by your surgeon, follow them diligently.
- Avoid gripping or lifting heavy objects.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.

SEEK IMMEDIATE MEDICAL CARE IF:

- There is redness, swelling, or increasing pain in the wound or joint.
- Purulent drainage (pus) is coming from wound.
- An unexplained oral temperature above 102° F (38.9° C) develops, or as your caregiver suggests.
- You notice a foul smell coming from the wound or dressing.
- There is a breaking open of the *wound* (edges not staying together) after sutures or tape has been removed.

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