Hand and Upper Extremity Clinic

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Endoscopic Cubital Tunnel Release
Post Surgery Information and Care

After an endoscopic cubital tunnel release, you should elevate and move your hand to reduce swelling, keep the incision clean and dry, and wear a splint as directed for support. Avoid heavy lifting and repetitive motions for the first several weeks, and begin physical therapy to regain strength and mobility. Avoid driving while taking narcotic pain medication and until you can grip the steering wheel comfortably.
Immediate post-op care

Immediate post-operative care (first 48 hours)

Keep the dressing dry:
Protect the surgical dressing with a waterproof covering if you shower, and keep it dry and clean.

Elevate your arm:
Keep your hand and arm elevated above your chest to reduce swelling and pain, especially when resting.

Use a sling:
Wear a sling as directed by your doctor for the first few days for support and comfort.

Gentle movement:
Gently move your fingers, wrist, elbow, and shoulder to prevent stiffness, as your doctor advises.

Manage pain:
Take prescribed medication, and contact your doctor if pain is unmanageable.

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Ongoing care and recovery

Incision care:
After 48 hours, you can remove the original dressing. Shower with gentle soap, but avoid soaking the incision in a bath, hot tub, or pool until cleared by your doctor. Pat the incision dry thoroughly after bathing and apply a clean, padded dressing or bandage.

Activity restrictions:
Avoid heavy lifting (over 5 pounds), significant gripping, or repetitive elbow flexing for at least one to two weeks, or as instructed by your doctor.

Return to work:
You can likely return to most normal activities within a week, but your return to work depends on your job and healing progress. Your doctor will provide guidance on this, which may be around 1-2 weeks for some jobs.

Pain management:
You may only need over-the-counter pain relievers like ibuprofen after the first few days.

Follow-up appointments:
Attend all follow-up appointments. Stitches are often removed around 1-2 weeks after surgery.

Physical therapy:
Physical therapy is often recommended to help regain range of motion and strength.

Driving:
You can typically resume driving once you are no longer taking narcotic pain medication and your doctor gives permission.

When to contact your doctor:
If you see signs of infection, such as thick, white, pus-like drainage, or if redness spreads or worsens over a couple of days.
If you experience severe pain that is not managed by your prescribed medication.