

### ULNAR NERVE DECOMPRESSION

This procedure is performed when the ulnar nerve shows signs of entrapment at the elbow. As well as being decompressed, the nerve may also be transposed to a new location.

The symptoms of paraesthesia may take weeks or months to improve and may never fully resolve depending on the extent of the compression suffered pre-operatively.

#### Post operatively

- The patient may be advised to elevate the arm for the first 24 - 48 hours after surgery.
- The patient is advised to mobilise the elbow as pain allows - it may feel stiff for the first 2 weeks after surgery.
- The patient is encouraged to use the hand as soon as possible.

#### 3 months post surgery

- Patient attends for review at Consultant's outpatient clinic
- If doing well, the patient will be discharged from clinic to their GP
- If the patient is struggling with pain, reduced ROM or function, they can be discharged to the care of the physiotherapists

#### Aims of Physiotherapy

- To restore pre-operative ROM in the upper limb, especially at the elbow and forearm
- To improve strength in the upper limb, especially around the elbow and in the hand.
- Scar management if necessary

#### Return to functional activities

- *Driving* after 1 - 2 weeks or when safe
- *Lifting* as able.
- *Swimming* breast stroke at 2 - 3 weeks, freestyle when able.
- *Return to work* light work (no lifting) – 2 - 3 weeks / as able  
heavy work from 2 months
- *Golf* 2 weeks (but not driving range).
- *Racquet sports* sport specific training when comfortable  
competitive play when able.