

POSTOPERATIVE INSTRUCTIONS ARTHROSCOPIC SHOULDER SURGERY

SURGERY: _____

DIET

- Begin with clear liquids and light foods (jello, soups, etc.)
- Progress to your normal diet if you are not nauseated

WOUND CARE

- Maintain your operative dressing, loosen bandage if swelling of the elbow, wrist, or hand occurs
- It is normal for the shoulder to bleed and swell following surgery – if blood soaks through the bandage, do not become alarmed – reinforce with additional dressing
- Remove surgical dressing on the third post-operative day (after 72 hours) – if minimal drainage is present, apply band-aids over incisions and change daily
 - If you have stitches leave in place
 - Steri strips or Brijitts (plastic stickers) should be left on but if they start to peel up, ok to trim the ends. They might fall off on their own and that is ok.
- To avoid infection, keep surgical incisions clean and dry – you may shower by placing a large garbage bag over your bandages the day after surge. NO immersion of operative arm (i.e. bath).
- After the first 3 days it is ok to shower and let water run over your incisions. Pat dry and re-cover your incisions with bandaids

MEDICATIONS

- Most patients will require some narcotic pain medication for a short period of time, which can be taken as per the directions on the bottle.
 - DO NOT drive a car or operate machinery while taking narcotic medication
- Primary Medication = Norco (Hydrocodone) or Percocet (Oxycodone)
 - Take 1 – 2 tablets every 4 – 6 hours as needed
 - Max of 12 pills per day
 - Plan on using it for 2 to 5 days, depending on level of pain
 - Do NOT take additional Tylenol (Acetaminophen) while taking Norco or Percocet
- Common side effects of pain medication are nausea, drowsiness, and constipation.
 - To decrease the side effects, take medication with food.
 - If constipation occurs, consider taking an over-the-counter laxative such as prune juice, Senekot, Colace (or Periocolase), or Miralax.
 - If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed
- •Ibuprofen 600-800mg (i.e., Advil) may be taken in between the narcotic pain medication to help. smooth out the postoperative “peaks and valleys”, reduce overall amount of pain medication required, and increase the time intervals between narcotic pain medication usage.

ACTIVITY

- When sleeping or resting, an inclined position (i.e. reclining chair) and a pillow under the forearm for support may provide better comfort.
- Do not engage in activities which increase pain/swelling (lifting or any repetitive above shoulder level activities) over the first 7-10 days following surgery
- Avoid long periods of sitting (without arm supported) or long distance traveling for 2 weeks
- NO driving until instructed otherwise by physician
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable

IMMOBILIZER (see handout from time of surgery for immobilizer restrictions)

- ☐ Your immobilizer should be **worn at all times** except for hygiene and exercises with physical therapy
- ☐ Your immobilizer should be **worn for 2 days**, then ok to remove and wear only for comfort. It is important and safe for you to start moving the shoulder in all directions to avoid stiffness.

ICE THERAPY

- Begin icing immediately after surgery.
- Please use ice packs to ice the surgical site. Ice packs can be applied for up to 20 minutes out of every hour until your first post-op visit.

EXERCISE

- Ok to do pendulum exercises very gently. Do not lift anything with your operative arm.
- You may begin elbow, wrist, and hand range of motion on the first post-operative day about 2-3 times per day
- Formal physical therapy (PT) will begin about 10-14 days after surgery or after your first post-operative visit

FOLLOW-UP CARE/QUESTIONS

- Follow up appointment: 2 weeks as scheduled
- Call (909) 862-1191 x32594 with questions during business hours or send a message using MyChart. After hours please call the after hours nurse line 1-909-793-3311 TTY 711

****EMERGENCIES****

- Contact the clinic if the following occur:
- Painful swelling or numbness
- Unrelenting pain
- Fever (note – it is normal to have a low-grade fever (101° and under) for the first day or two following surgery) or chills
- Redness around incisions
- Color change in wrist or hand
- Continuous drainage or bleeding from incision (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting

Proceed to the nearest emergency room if you have an emergency that requires immediate attention.