

ASHBURN • CENTREVILLE • FAIRFAX • RESTON PHONE: 703-435-6604

Post-Operative Instructions Following Shoulder Replacement

1. WHEN DO I COME IN FOR MY FIRST FOLLOW-UP VISIT?

An appointment should have already been scheduled for you. If not, please call the office when you return home to schedule an appointment for approximately one week after your surgery.

2. WHAT SHOULD I EXPECT AFTER SURGERY?

After surgery, it is normal to experience some discomfort. A prescription for pain medicine should have been given to you at the hospital or your pharmacy. Please fill the prescription and use the medication regularly as directed for the first twenty-four hours and then as needed after the first day. For minor discomfort, Tylenol may be used **instead** of the prescription medication.

Please do not use NSAIDs (Advil, Aleve, Motrin, Ibuprofen, etc.) for 6 weeks after your surgery.

A low-grade temperature (99-101 degrees F) is common. Please call the office if your temperature is consistently elevated over 101.5 degrees.

3. HOW LONG SHOULD I KEEP MY SHOULDER DRY AND WEAR THE BANDAGE?

The bandage that is on your shoulder is waterproof. You may get it wet in a shower as early as the day after surgery. Please do not submerge it in a bath, pool or hot tub. Please leave the bandage in place until you return for your post visit.

4. WHAT EFFECTS MIGHT I NOTICE FROM THE ANESTHESIA?

If you had <u>general</u> anesthesia, some fatigue and lethargy may be noticeable for a day or two. Occasionally, nausea may occur. Eating light foods will help. Resume your regular diet as the nausea resolves. Call the office if your nausea persists beyond the night of surgery.

If you had a <u>Block</u>, soreness around the injection site is common. The soreness should resolve by three to four days following the surgery. If, by that time, it has not resolved or it is getting worse, please call my office or call the hospital and ask for the anesthesia office

5. WILL I NEED TO TAKE A BLOOD THINNER?

Unless you have been told by me or another physician or healthcare provider, you should be on a blood thinner. Typically, I suggest a baby Aspirin (81mg) two times a day (morning with breakfast and evening with dinner) for 6 weeks (when your sling is discontinued).

If you are on <u>another</u> blood thinner or if you are unable to take Aspirin and we have <u>not</u> decided on a different blood thinner, please let me know.

If you cannot take blood thinners for some reason or you are having some problem with taking the blood thinner that we have agreed to, please let me know.

6. HOW MANY DAYS SHOULD I USE THE SLING?

Use the sling until further notice. Your therapist and I will guide you. Beginning on the first post-operative day, remove the sling three to four times a day and flex and extend (bend and straighten) your elbow 15-25 times with your arm at your side.

7. WHAT CAN I DO TO HELP REDUCE SWELLING AND DISCOMFORT?

Limiting your activities and resting with your shoulder elevated above your heart (i.e. sitting upright) are the best methods of reducing swelling and discomfort and will speed up your recovery. You may have a cool therapy device. If this is the case, the company's representative should have provided you with instructions on its proper use. If not, please call their office for assistance. If you cannot reach them, please call our office. Ice may also be used. Fill a plastic bag with ice cubes and place it over the shoulder with a towel between the skin and the ice bag. Leave the ice in place for 15-30 minutes. This may be done every hour while awake.

Sleeping on your back with the head of your bed raised to ≥ 30 degrees or sleeping on the non-operative side will reduce discomfort at night. You may also want to take pain medication before going to sleep.

Regarding your activity level, use common sense as your guide. Advance in your daily activities as tolerated. Avoid strenuous, risky or painful activities. Limit shoulder activities to those suggested by me or your therapist.

8. WILL I HAVE AN EXERCISE PROGRAM TO FOLLOW?

Remove your sling three times a day and perform pendulum exercises, beginning the day after surgery. These are performed by leaning over, bending your waist approximately 90 degrees and resting your non-operative arm on a table to support your body. Your operative arm should hang toward the ground. Allow your arm on the operative side to rotate in a clockwise fashion producing small circles with your hand. Perform this for approximately 10 circles and then repeat in a counterclockwise fashion. Let gravity do most of the work. This is a simple motion designed to reduce stiffness. It should not be performed too fast or with large arcs of motion.

You have been given a prescription for physical therapy. If you have not already scheduled therapy, please arrange for this to begin **as soon as possible**. If you need assistance locating a therapist, please call our office.

9. WHAT ELSE CAN I EXPECT?

- 1. Bruising and swelling of the shoulder, arm, and hand is common. This is caused by bleeding from the bone and soft tissues (cut during the procedure) into the tissue just deep to the skin.
- 2. Some patients develop numbness and/or stiffness in the hand and fingers following surgery. This most often is due to swelling and immobilization of your arm and often resolves shortly after the swelling subsides and therapy begins. If numbness in your hand persists, please call the office.
- 3. It is common to develop a stiff neck following surgery. This may in part be caused by the immobilization of your arm. By frequently moving your neck in slow circles as well as side to side and front to back, this stiffness may be minimized.