



FORT WORTH ORTHOPEDICS

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Postoperative Instructions for Outpatient Shoulder Surgery

Your Surgery Included:

Arthroscopic

- Diagnostic
- Debridement
 - Labrum
 - Rotator Cuff
 - Cartilage
- SLAP Repair
- Instability Repair
- Rotator Cuff Repair
- Subacromial Decompression /Bursectomy
- Biceps Tenotomy / Tenodesis
- Distal Clavicle Resection
- Contracture Release

Open

- Instability Repair
- Rotator Cuff Repair
- Distal Clavicle Resection
- Biceps Tenodesis
- Contracture Release
- Fracture Fixation
- Joint Replacement

1. **Explanation:** Shoulder surgery is commonly done in an 'out patient' setting allowing you to have surgery and return home both safely and comfortably the same day. On occasion, a patient will have nausea or pain severe enough to require overnight hospitalization.

2. **Pain Management:** A cold therapy cuff, pain medications, local injections, and in some cases, regional anesthesia injections are used to manage your post-operative pain. The decision to use each of these options is based on their risks and benefits.

Cold Therapy: You may have been sent home with a cold wrap for your shoulder. This wrap will help relieve pain and control swelling. Use the wrap throughout the day for the first two days and then as needed.

Regional Anesthesia Injections: You may have been given a regional nerve block either before or after surgery. This may make your entire arm numb for 24-36 hours.

3. **Medications:** You were given one or more of the following medication prescriptions before leaving the hospital. Have the prescriptions filled at a pharmacy on your way home and follow the instructions on the bottles. If you need a refill on your medication, please call your pharmacy.

Narcotic Medication (usually Norco or Tylenol # 3): Begin taking the narcotic medication before your shoulder begins to hurt. Some patients do not like to take any medication, but if you wait until your pain is severe before you take the narcotic medication, you will be very uncomfortable for several hours waiting for the narcotic to work. Always take the narcotic medication with food.

Phenergan: If you have nausea at home, use this medication as directed.

Antibiotic (Keflex or Cleocin): Depending on the procedure, you may have been sent home with a two-day course of an antibiotic. Take as directed.

4. **Diet:** Eat a bland diet for the first day after surgery.
5. **Activity:** After you arrive at home, spend most of the first 24 hours resting in bed, on the couch, or in a reclining chair. After the first 24 hours, slowly increase your activity level based on your symptoms.
6. **Dressing Change:** Remove the dressing on the _____ day. It is normal for some blood to be seen on the dressings. It is also normal for you to see apparent bruising on the skin around your shoulder when you remove the dressing. If present, leave the steri-strip tape across the incisions. If you are concerned by the drainage or the appearance of your shoulder, please call the office.
7. **Showering:** You may shower on the day after surgery, but please keep the wound dry and clean. Do not let the wound soak in water until sutures are removed. If a brace or splint is applied, wrap in a plastic bag to bathe.
8. **Shoulder Abduction Pillow or Brace:** You may have been sent home with a pillow or brace holding your arm away from your body. You need to wear it _____ hours a day for _____ days / weeks. You may remove the brace or sling when changing clothes or bathing.
9. **Shoulder Exercises:** Begin shoulder exercises the first day after surgery in order to help you regain your shoulder motion. You may do the following marked exercises:
 - Shoulder shrugs** – Shrug your shoulders up and down.
 - Pendulums** – Bend forward allowing your arm to hang down in front of you. Gently swing your arm side-to-side and front to back.
 - Passive abduction** – Have a family member gently lift your arm away from your body bringing your elbow up to the level of your shoulder.
 - Shoulder rotation** – With your arm at your side, have a family member gently rotate your arm internally and externally.
 - Pulley exercises** – Put the pulley over the top of a door. Stand facing the door. Use your good arm to gently pull your operative arm up in front of you.
 - Elbow motion** – Straighten and bend your elbow.
10. **Physical Therapy:** Physical therapy is an essential component to your recovery from surgery. Unless other instructions are given, you will begin physical therapy on the day after surgery. Mary will coordinate your first appointment. We will work together with the physical therapist to help ensure the best possible outcome.

Your ability to do these exercises will improve as you continue to do them. Do these exercises for 2-5 minutes five times a day.

Your first post-operative visit will be 10-14 days after surgery. If you have any problems, please contact the office at (817) 433-3450 opt # 4.