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POST-OPERATIVE EDUCATION: SHOULDER REPLACEMENT

SLING:

You will be wearing a sling with a pillow at your side for 6 weeks after surgery. This is necessary to protect your shoulder while it heals properly. As shown to you in the hospital, you may loosen your sling to move your hand, wrist and elbow after surgery, but you **MUST** keep your sling on at ALL times, except while changing, showering and doing therapy exercises. Wear a large loose fitting shirt around your operative arm in the sling initially. We **DO** want you to be up and walking around at home as much as possible after surgery.

MOVING YOUR SHOULDER:

It is OK for you to loosen your sling and move your hand, wrist and elbow as shown throughout the day. You may also be asked to do pendulum exercises several times per day. It is important that you do not attempt to lift your arm under your own power for 6 weeks. **NO** active internal rotation (moving toward your body under power of your surgical arm) or passive external rotation (moving away from your body under power of your other arm). Your surgeon may give you additional instructions regarding movements to avoid. You may also squeeze the ball provided on your sling with your arm in the sling. You will learn your shoulder exercises when you come to our office and start physical therapy.

Biceps tenodesis: **DO NOT** flex your biceps or triceps muscles. You can still move the elbow of the arm that was operated on under power of your other arm. You will learn your shoulder exercises when you come to our office and start physical therapy. Use the pillow for comfort.

ICE:

Please note that with the dressings placed during surgery, you may notice decreased benefit from the ice. Often placing the ice adjacent to the surgical site increases the effectiveness. Use as needed and if you notice benefit. See the next section for suggestions to make the ice more beneficial. Ice is most helpful in the first 3 days after surgery, but may help up to 2 weeks after surgery. We do not recommend that you use heat, as this can increase swelling.

You may use a commercially available ice bag or fill a large plastic bag with ice and water. (Do not place a plastic bag directly on your skin, rather place a towel on your shoulder in between your skin and the ice bag.) You can ice your shoulder 20 minutes on and 20 minutes off throughout the day. Do not ice an

area longer than 30 minutes at a time, as this can cause frost bite.

BANDAGES:

If an *Aquacel* bandage was placed on your shoulder is intended to remain in place up to 7-14 days. If the dressing becomes compromised, it is OK to remove it as early as 3 days following the surgery. If a *Prineo* mesh dressing was placed, it will be removed in clinic at your post-operative visit. It is OK to get both dressings (or the incision) wet in the shower, but it is very important not to soak the arm underwater (no bath, pool, hot tub etc...) for 3 weeks. Simply let the soapy water run over the dressing and gently pat dry with a towel. Do not place any lotion or other ointment around your incisions.

MEDICATIONS:

Narcotic pain medicine (such as Percocet – oxycodone or Norco – hydrocodone): Take this AS NEEDED only. Start with Percocet (stronger) if given a prescription for multiple narcotics. Transition to Norco (less potent) as your pain improves. You may stop narcotics whenever you can tolerate the pain. Do not take additional Tylenol (also called acetaminophen) with these medicines, as they already have Tylenol in them. You may SUBSTITUTE Tylenol for a narcotic pill if you choose to. Be certain that you do not exceed the maximum Tylenol dose as noted on the Tylenol bottle.

Zofran (ondansetron): You may take this medication if you are having nausea or vomiting.

Stool softener: Pain medicines often cause constipation. It is best to take most of this medicine with some food, as it can cause a little stomach upset.

You should take Aspirin following surgery to help prevent a blood clot. Take one full-strength pill (325 mg) twice a day. If you are unable to take Aspirin, you should take another blood thinner. Discuss this immediately with your surgeon. You should also wear the compression stockings that were placed on you following surgery.

*Please do not take NSAIDs such as Ibuprofen or Motrin, as these may slow healing of bone and tendon.

FOLLOW-UP APPOINTMENTS:

You should have a **follow-up appointment** with your surgeon in about 2 weeks after surgery. You should also have a chance to ask questions of your surgeon or Physician Assistant the morning after surgery in the hospital. Call (480) 964-2908 right away if you do not have an appointment already scheduled. We will check your incisions and remove any sutures at the 2-week visit. We will also answer any specific questions you may have about your surgery. Physical Therapy should have been arranged prior to surgery. If you have not scheduled therapy, please call our office immediately. Your surgeon may initially hold therapy depending on the extent of your surgery.

CALL OUR OFFICE at (480) 964-2908 with any urgent or emergent questions or concerns that you may have, or if you develop swelling in your leg with calf pain, swelling that will not go away when you elevate your leg, a temperature above 101.4, or drainage from your incisions.

If you experience high fever (above 102.5), chest pain, difficulty breathing, fainting: go to an **Emergency Department** close to your house.