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POST-OPERATIVE INSTRUCTIONS SHOULDER ARTHROSCOPY

Wound Care

After arthroscopy the wound is covered with dressings. These should generally be left in place for 3 days. Due to the large amount of fluid used during the arthroscopy, it is normal to see some bloody drainage on the dressings. If bright red blood persists despite elevation and icing, please call the doctor. Bruising down into the elbow and chest wall is not uncommon.

You may remove your dressings 3 days after your surgery. Your incisions will be covered with visible sutures. Do not remove the steri-strips or cut any of the visible sutures. Cover the incisions with Band-Aids.

Be sure to watch for signs and symptoms of infection after surgery, which includes: redness, increased swelling, warmth, wound drainage, or a fever greater than 101.5 degrees. If you notice any of these signs and symptoms please notify your surgeon.

Showering

Showering is allowed with plastic covering the wounds. You may shower and get the surgical area wet on postoperative day five. You may allow water to run over the steri-strips or the visible sutures, however, do not scrub or soak them. Carefully remove your shoulder sling before showering. **DO NOT** immerse your incisions under water. This means **NO** baths, swimming, or hot tubs of any kind for at least two weeks after surgery. To clothe yourself, remember to put your operative arm in your shirt first (keeping your hand at your side), pull the shirt in position and then reach through the remaining sleeve with your good arm. A helpful hint: button up shirts are the easiest and safest to wear while recovering from surgery. Once dressed, be sure to properly place your operative arm in the shoulder sling.

Sleeping

Patients are generally more comfortable sleeping in a reclining chair or with pillows propped behind the shoulder and/or under the forearm. Some difficulty with sleeping is common for 2-3 weeks after surgery.

Ice

Icing is very important for the first 5-7 days after surgery. While the post-op dressing is in place, icing should be continuous. Once the dressing is removed on the third day, ice is applied for 20-minute periods 3-6 times per day. Care must be taken with icing to avoid frostbite to the skin. To avoid frostbite, place a towel or T-shirt between the ice and your skin.

Sling

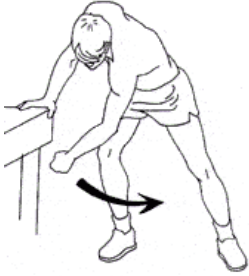
Following shoulder surgery, it is common to use a sling for 3-5 days after surgery. The sling is for your comfort only and is not required. Even if you are using the sling, it is important to remove it several times a day to move your elbow, wrist, and hand unless instructed otherwise.

Activity

On the first post-op day, begin doing the Codman's exercises. You may use your arm to assist with dressing, eating and personal hygiene unless specifically instructed not to by Dr. Farber. Be sure to use and move your hand, wrist, and elbow in order to decrease swelling in your arm. Passive range of motion (using the opposite hand to move the operated arm) is always encouraged. Squeezing a tennis ball or squeeze ball is encouraged as it will reduce the amount of swelling in your arm and hand. While exercise is important, don't over-do it.

Exercises

- **Codman's Exercises:** Bend over at the waist and let your arm relax completely. Slowly swing your arm from side-to-side as illustrated. Perform for 5 minutes 4-6 times per day.



Physical Therapy

You will be prescribed Physical Therapy to start after your first follow-up visit. There is a standard protocol that you will follow with your therapist.

Medications

Take as prescribed. **Narcotic pain medications:** Percocet or Vicodin is used for severe pain. It can be taken up to every four hours as necessary. Most patients only require Vicodin or Percocet for the first week. Once pain is better controlled, you may simply take extra strength Tylenol one to two tabs every six hours. Take these medications with food. If you have any problems taking the medications please stop them immediately and notify the office.

Local anesthetics are put into the joint during surgery. It is not uncommon for patients to encounter more pain on the first or second day after surgery when the effect of these medications wears off. Using the pain medication as directed will help control pain with little risk of complication. Taking pain medication before bedtime will assist in sleeping. It is important not to drink or drive while taking narcotic medication. You can supplement the narcotic medications with 200 mg or 400 mg of ibuprofen every 4-6 hours. You should resume your normal medications for other conditions the day after surgery. We have no specific diet restrictions after surgery but extensive use of narcotics can lead to constipation. High fiber diet, lots of fluids, and muscle activity can prevent this occurrence.

Eating

The anesthetic drugs used during your surgery may cause nausea for the first 24 hours. If nausea is encountered, drink only clear liquids (i.e. Sprite or 7-up). The only solids should be dry crackers or toast. If nausea and vomiting become severe or the patient shows signs of dehydration (lack of urination) please call the doctor or the surgical center.

Driving

Most patients are able to drive an automatic vehicle if surgery does not involve their right arm as soon as they stop taking narcotic pain medications. Driving while under the influence of narcotic medications (ie Percocet or Vicodin) is extremely dangerous and discouraged in all patients.

Follow-Up

Your initial follow up visit will usually be 10-12 days after surgery.

If you have any questions, concerns or problems please feel free to contact the office at (480) 219-3342.