Matthew H. Blake, MD Team Physician, University of Sioux Falls Assistant Professor, Department of Orthopedic Surgery University of South Dakota School of Medicine www.MatthewBlakeMD.com



# **POSTOPERATIVE INSTRUCTIONS SHOULDER - TOTAL SHOULDER ARTHROPLASTY**

#### PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION IF NECESSARY - DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE HOSPITAL OR VIA PHONE TO DR BLAKE'S STAFF AFTER ARRIVING HOME

#### OFFICE PHONE NUMBER 605-504-1100

## WOUND CARE

- Change your dressing 7 days after surgery using the Mepilex dressing provided. Keep new dressing in place until follow up appointment.
- To change the dressing:
  - Wash your hands with warm water and soap
  - Remove the dressing and discard it. If there are small strips of tape (Steri-strips) stuck to the skin over the incision, do no remove them. Simply leave them alone.
  - Check the incision for signs of infection, such a redness, swelling, drainage or unusual pain.
  - Gently clean around the incision with cloth damp with warm soapy water. Do not get the incision or stitches wet.
  - Apply a new dressing to the incision site. Do not apply ointment to the incision.
  - Wash your hands Your doctor will tell you when the stitches or staples (if there are any) will be removed: This is usually at your first post-operative visit.

## **MEDICATIONS**

- The nerve block that was given will wear off within 8-24 hours. It is recommended to begin the prescription pain medication provided to you upon arriving home, and continue every 4 hours for the first 1-2 days after surgery.
- If you are having problems with nausea and vomiting, contact the office to possibly have your pain medication changed or something additional prescribed for nausea (605-504-1100 – ask for Dr. Blake's team.)
- Common side effects of the pain medication are nausea, drowsiness, and constipation. To help minimize risk of side effects, take medication with food if constipation occurs, consider taking an over-the-counter stool softener such as Dulcolax or Colace.
- > Do not drive a car or operate machinery while taking the narcotic medication.
- As long as you have no personal history of adverse response to anti-inflammatories, use an over-the counter anti-inflammatory such as Ibuprofen (i.e. Advil/Motrin) 600-800 mg as frequently as every 8 hours with food to help swelling and pain in addition to the prescribed pain medication.

# **ICE THERAPY**

- Begin immediately after surgery use the ice machine (when prescribed) as directed for the first 2-3 days following surgery. Ice at your discretion thereafter. When using "real" ice, avoid direct skin contact > 20 mins to prevent damage / frostbite of skin. In either case, check the skin frequently for excessive redness, blistering or other signs of frostbite.
- > Remember to keep the extremity elevated while icing when able.
- For technical questions regarding the ice machine, please contact the vendor directly using the telephone number on the device.

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# ACTIVITY

- > Remain in sling at all times other than personal hygiene and wardrobe changes.
- > Okay to remove sling 3x daily for bending of elbow, wrist, hand beginning on the first post-operative day.
- > Do not engage in activities which increase shoulder pain over the first 7-10 days following surgery.
- > NO driving until off narcotic pain medication.
- > Okay to return to work when ready and able. Please notify office if written clearance is needed.

## EXERCISE

- Begin exercises 3x daily starting the day after surgery (wrist flexion/extension, elbow flexion/extension, shoulder range of motion, pendulum swings) unless otherwise instructed. See attached pictures of exercises for reference. Three sets of 10-15 repetitions each is advised. If the exercises cause pain, stop and try again later in the day.
- Shoulder stiffness and discomfort is normal for a few days following surgery.
- > Avoid movement of the arm against gravity or away from the body.
- > Formal physical therapy (PT) will begin after your first post-operative visit if necessary.

#### DIET

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

#### **\*\*EMERGENCIES\*\***

- > Contact Dr. Blake's team at 605-504-1100 if any of the following are present:
  - D Painful swelling or numbness that progressively worsens
  - □ Unrelenting pain
  - □ Fever (over 101° it is normal to have a low-grade fever for the first day or two following surgery) or chills
  - □ Redness around incisions that worsens
  - Continuous drainage or bleeding from incision (a small amount of drainage is expected)
    - □ Difficulty breathing
    - □ Excessive nausea/vomiting

#### DO NOT CALL THE HOSPITAL OR SURGICENTER FOR EMERGENCIES IF YOU HAVE A NEED THAT REQUIRES IMMEDIATE ATTENTION, PROCEED TO THE NEAREST EMERGENCY ROOM

# WRIST FLEXION/EXTENSION

Actively bend wrist forward. Then backwards as far as you can. Repeat 10-15 times. Do 3 sessions per day.

## ELBOW FLEXION / EXTENSION



With palm either UP, DOWN, or THUMBSIDE UP gently bend elbow as far as possible. Hold for 5 seconds. Then straighten arm as far as possible. Repeat 10-15 times. Do 3 sessions per day. \*\*DO NOT PERFORM THIS EXERCISE IF BICEP TENODESIS WAS PERFORMED\*\* PENDULUM SWINGS (Clockwise/counterclockwise)



Let arm move in a clockwise circle, then counterclockwise by rocking body weight in a circular pattern. Repeat 10-15 times. Do 3 sessions per day

#### PENDULUM SWINGS

(Side to side)



Gently move arm from side to side by rocking body weight from side to side. Let arm swing freely. Repeat 10-15 times. Do 3 sessions per day

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