

Post-Operative Instructions

For the Shoulder and Arm

Read these instructions very carefully and keep them handy. Everything you need to know is here. Reading carefully will save you time on the phone with our office to ask these same questions. After hours, the only calls the answering service will forward to your doctor will be those listed under item #1 below.

1. **Call your surgeon at any time (off hours included)** – for the following events:
 - a. Circulation Problems = the fingers present color changes to blue or white with no pink
 - b. Excessive bleeding = bright red blood keeps coming out of the dressing
 - c. Loss of feeling in your hand or finger tips
2. **Call this office during office hours** – for the following: Questions about your medications, your next appointment, your post-operative restrictions, other general questions
3. **Call your regular internal medicine doctor** – if any other medical condition you have such as heart or lung problems seem to get worse in the period after your surgery
4. **Call 911** – if you have a sudden crisis that has to do with anything other than your arm during the period after your surgery such as symptoms of a heart attack or other serious event
5. **Medication** – You have been given enough pain pills including the refill to cover you beyond the next office visit. To control various symptoms do the following:
 - a. Nausea – drink light liquids and try soft foods. If the nausea or vomiting persists, call your doctor to have an anti-nausea medication prescribed
 - b. Itching – Itching is a common side effect from pain medications and over the counter Benadryl is still the best medication you can take for this
6. **Controlling Your Pain** - You are going to have pain, you can count on it
Here's what you can do to minimize it:
 - a. Keep the operated area higher than your heart at all times
 - b. Take your pain pills every four hours (do not get behind)
 - c. Ice bags can be applied to the outside of the dressing for 20 minutes at a time for the first few days
 - d. Rest and take it easy, if you are running all around, you will create a lot more pain for yourself
7. **Taking care of your dressing** – Don't mess with your dressing unless you were specifically told to do something by your doctor. Keep it dry. Sponge baths are recommended up until your sutures are removed at your post-operative visit.
8. **Moving your arm and hand** – you will be told what joints or tendons not to move. After shoulder surgery, it is very important to move your elbow, wrist, and hand for at least 10 minutes 5 times a day. If you have a sling, carefully loosen the sling so that you can straighten out your elbow. All other joints not involved in the surgery should be moved to their full capacity every single day to prevent them from getting stiff.
9. **Eating after surgery** – Start slowly and eat lightly. Anesthetics and pain medications change the way your digestive system works. If you had an anesthesia tube in the throat, you may be hoarse, have a sore throat, and even spit up small amounts of blood.

What To Expect With Surgery

Will my shoulder/arm be NORMAL after surgery?

Surgery is not a normal event for the human body to go through. Wherever surgery is performed scar tissue forms. Scar is not normal tissue. We try to minimize scar formation by using sound surgical techniques and post-surgery therapy when appropriate. The goal of surgery is to give your shoulder/arm as normal a function as possible.

When will I be all better?

The length of time to recover from surgery will depend on the surgery performed. Most surgeries have a 2-4 month healing period. Additional changes keep taking place for up to 2 years.

Is surgery guaranteed to solve the problem?

NO! No surgery in the world has 100% good results. The very best procedures are about 95%. Most surgeries are between 70-90%. Some surgeries are even as low as 50/50. Why do we operate if the results can not be predicted any better than that? Surgery is done to improve the overall situation. Sometimes partially solving the problem makes life much more livable. Deciding when surgery should be done and what procedure should be chosen is very difficult and requires a lot of judgment.

What can I do to improve my results?

Everything! You have more opportunity to make a good or a bad result for yourself than even your surgeon. What happens after surgery really counts. You will most likely be doing therapy on a daily basis and will receive directions from our office or your therapist. Some of you will work with physical therapists. Some of you will work on your own.

Can serious problems arise during or after surgery?

Yes. Although rare, a problem (also called complication) can occur after surgery. Some complications are more serious than others. All of them have to be treated. The patient who admits a complication is happening and does what is necessary to get over it will usually be OK. The patient who denies that a complication is happening or dwells on asking "why me?" will usually develop a difficult problem. Some complications can not be prevented. Fortunately, this type of complication is very rare. Luckily most complications can be prevented by carefully following instructions. Let's go over the most common ones ahead of time.

1. **Swelling:** Occurs 100% of the time. Most shoulder swelling decreases over the first few weeks. Pump swelling out of the hand by using the muscles in your hand and wrist in a fist like motion. Directions for moving your shoulder and elbow will be given to you by our office or Dr. Smith.
2. **Stiffness:** Can be a problem after shoulder surgery. Once stiffness sets in, it is very difficult to get rid of. To help fight against stiffness, it will be very important to follow the directions and recommendations of our office, Dr. Smith, and your therapist.
3. **Numbness:** Every incision cuts through small nerves in the skin. This may leave a patch of numb skin near the incision. The size of this patch usually gets smaller with time.
4. **Infection:** This is the most feared complication. You can diminish the chance for infection by following your instructions on dressing and wound care. Do not let your

dressing get wet. If you think you are developing an infection, call the office immediately. Fortunately, infections are very rare but they still can happen.

5. **Failure to heal:** No matter how well they're put together, not all injured or repaired structures will heal in a timely matter.
6. **SMOKING!!!!!!!!!!!!!!!!!!!!!!** Smoking increases the risk of all these complications. You must really stop smoking before your surgery. So, I congratulate you on the decision you have just made to quit smoking. If you can't, you should seriously consider not having your surgery. It is that dangerous!
7. **Other complications:** There are many more possibilities that are fortunately uncommon. If these problems arise, the best thing to do is meet them head on. A motivated patient can overcome most problems with enough time and effort.