TOTAL/REVERSE SHOULDER REPLACEMENT



Post-Operative Instructions

Wound Care

Keep your dressing on until your first post-op appointment. It is normal for some bleeding to occur. If you bleed through your dressing, do not be alarmed. You can come into the office for a wound check, and we can replace your dressing for you. Bruising down into the elbow and chest wall is not uncommon.

Showering

Showering is allowed with the dressing we apply. Carefully remove your shoulder sling before showering. Do NOT submerge your dressing under water. This means NO baths, swimming, or hot tubs for at least three weeks after surgery your dressing under water. Let the water run over the dressing. Make sure to use your opposite arm to clean under your armpit with warm, soapy water.

Ice Therapy

Icing is very important for the first 10-14 days after surgery. **Begin icing immediately after surgery.** Use an ice machine continuously or ice packs every 2 hours for 20 minutes daily until your first post-operative visit. Remember to keep your arm supported while icing. Care must be taken with icing to avoid frostbite to the skin. To avoid frostbite, place a T-shirt between the ice and your skin.

Sling

Wear your sling at all times, including for sleep, except when showering or performing exercises (see below). It is important to remove your several times a day to **move your elbow**, wrist, and hand to prevent stiffness.

Eating

The anesthetic drugs used during your surgery may cause nausea for the first 24-48 hours. If nausea is encountered, eat and drink only clear liquids (i.e. Sprite or 7-up, jello, and soup). The only solids should be dry crackers or toast. If nausea and vomiting become severe or if there are signs of dehydration please call the office. We also provide you with an anti-nausea medication, either ondansetron or promethazine, that you should take as prescribed. You may progress to your normal diet if you are not nauseated.



Lee A. Kaback, M.D Laura Piazza, PA-C

Hours: 8:00am-4:30pm

After Hours Assistance: (518) 489-2663

www.kabackshoulder.com



Driving

NO driving until instructed otherwise by physician.

Medications

A nerve block is used during surgery which may last up to 24 hours. However, it is important to still **take your pain medication to stay ahead of the pain**. You should start your pain medications when you get home.

Most patients will require some **narcotic** pain medication (such as **OXYCODONE**) for the first 10-14 days. A short course of a strong **anti-inflammatory** medication called **TORADOL** (**ketorolac**) may also be prescribed. It is important that you take these as prescribed. Common side effects of narcotic medications are nausea, drowsiness, and constipation. To decrease these potential side effects, take your medication with food. Consider taking Colace as directed on bottle to prevent constipation. We provide you with an anti-nausea medication that should also be taken as prescribed.

Taking pain medication before bedtime will assist in sleeping. It is important not to drink alcohol or drive while taking narcotic medication. After the Toradol is finished, you can supplement the narcotic medications with 200 mg or 400 mg of ibuprofen every 4-6 hours with food. You can alternate the ibuprofen with Tylenol 500mg one to two tablets every 6 hours as needed. Do not exceed more than 4000mg of Tylenol in 24 hours.

If you are having refractory nausea and vomiting, contact the office to possibly have your medication changed. If you have any other problems taking the medications such as a rash, dark/tarry stools, abdominal pain, lightheadedness, or trouble breathing, please stop them immediately and notify the office. You should resume your normal medications for other conditions the day after surgery as instructed by your PCP or specialists.

Sleeping/Activity

You can use your arm to assist with dressing, eating and personal hygiene unless specifically instructed not to. Be sure to use and **move your hand, wrist, and elbow in order to decrease swelling in your arm.** This will also help prevent stiffness in those joints. Patients are generally more comfortable sleeping or resting in a reclining chair or with pillows propped behind the shoulder and/or under the forearm. Difficulty with sleeping is common after surgery.

Do not engage in activities which increase pain/swelling over the first 14 days following surgery. Avoid long periods of sitting (without arm supported) or long distance traveling for 2 weeks. Avoid leaning on the arm and do not lift any weight with the involved arm.



ON POST OP DAY #3, Start home exercises as described below.

Range of Motion Exercises

Begin the exercises below 24 hours after surgery.

Grip Squeezes

Rest arm on a table. Grip hand size ball firmly, squeeze then release. Perform 20 reps



Pendulum Circles

While standing, bend forward using a table/counter for support. Let your surgical arm dangle straight down. Draw circles in the air with your surgical dangling arm. Perform 10 times clockwise then 10 times counterclockwise.



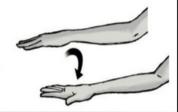
Elbow Flexion and Extension

While seated, with elbow supported, rest arm on chair or table. Bend and straighten your elbow (thumbs up).
Perform 20 reps



Elbow Supination/Promation

Rest your arm on a table with a slight bend in your arm. Then rotate your hand to face palm up. Return your palm to face down Perform 20 reps



Exercises

Formal physical therapy (PT) will begin about 10-14 days post-operatively with a prescription provided at your first post-operative visit. There is a standard protocol that you will follow with your therapist. Perform the range of motion exercises taught to you by the physical therapist two times per day.

Follow-Up

Your first post-op appointment will be 7-10 days after surgery. This was already scheduled for you. If you have any questions or problems before your post-op visit, please feel free to contact the office at **518-489-2663**. We look forward to seeing you!