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### **POST OPERATIVE SHOULDER INSTRUCTIONS**

Elevation and Ice: Icing your shoulder is imperative for recovery as it decreases swelling and the associated pain. Doing so helps decrease swelling and pain.

- Ice and elevation are *imperative* during the first two weeks following your surgery. You cannot do either too much. You will continue to ice and elevate for approximately six weeks post surgery and then as needed after activity.
- A Cryo Cuff cooling system will be used to ice your shoulder. The Cryo Cuff is effective as it provides both cooling and compression to address your swelling. Use your Cryo Cuff as much as possible. You can sleep with the Cryo Cuff. Immediately post-op you will have on a bulky dressing and you will not feel the cooling system, however the compression will be useful and the bulky dressing will be removed at your first post-op visit.

#### Dressings:

- Post-op you will go home in a bulky dressing. You will be instructed on how to change your dressing and given supplies at your post-op visits in our office. Please *do not* change the dressing yourself until you are instructed to do so. Then you can change it again in one week. We have you change your dressing only once in an effort to minimize contact with the surgical site, and thus decrease your chance of post surgical infection.
- Bloody drainage during the first few days post-op is normal. If your dressing becomes soiled, change it as needed to keep it dry and clean. If you experience heavy bleeding that soaks the bandages, contact the office.
- When changing your dressing, evaluate your incision and scope holes for possible signs of infection. These include increased redness, warmth, and/or milky drainage. Some redness and warmth are expected. We will evaluate also your incision site at your post-op visit. Fever can also indicate infection.

While it is normal to have a low grade fever following surgery, a temperature of 101 degrees or higher should be reported to our office. If you are unsure or have any concerns, contact the office immediately.

**Sutures and steri-strips:**

- Your sutures (stitches) are dissolvable and do not need to be removed. They are left sticking out from the ends of your incision and you can often see them—they look like translucent fishing thread.
- Your incisions are covered with small pieces of fibrous tape called steri-strips. The steri-strips hold the incision site together for better healing. You will see dried blood on them but we do not change them for two weeks as we don't want to pull off scabs or stress the incision site.
- You will come in to the office 1 – 3 days post-op and then for scheduled visits so that we can assess your incision site and healing progress. At this appointment we will remove your steri-strips, clip the ends of your sutures, and reapply new steri-strips.
- Let this second set of steri-strips fall off on their own. Do not remove them. As the edges of the steri-strips begin to pull up over time simply trim the edges.
- It is not unusual for the dissolvable threads used to close your incision sites to surface and as such you may feel them on the skin surface. Do not pull or them, cut them, or try to remove them as you will create a scar and introduce the possibility of infection. We will remove them at you office visit.
- To reduce scarring, keep your surgical site out of the sun for one full year after surgery. Cover the site with clothing, sunscreen, or zinc oxide.

**Bathing:**

- Once you come into the office and you have your bulky dressing removed, you may sponge bathe or take a bath in a manner that keeps your dressing dry. Should the site get wet, pat dry and replace dressing with fresh and dry pieces.
- Avoid submerging your shoulder in a tub or swimming pools until all incisions are completely healed usually 3 weeks, to prevent infection. No hot tub for 6 weeks after surgery as the heat can make your shoulder swell.

Range of Motion (ROM):

- Regaining motion in your shoulder post-op is very important. We typically suggest you do some exercises three times each day. We will teach you these exercises as will your physical therapist.
- You have been given a sling to wear which you will come out of several times each day to straighten and bend your elbow. This will help to avoid stiffness in the joint. We will demonstrate proper positioning and shoulder stabilization at your first post-op visit. Do not come out of your sling until you are told to do so.

Medication: You were given prescriptions for the below 3 medications at your pre-op assessment. Use them as directed on the label. Read all the precautions regarding your medications and discuss all interactions with other medicine you are taking with your physician.

1. Non Steroidal Anti-Inflammatory (NSAID): begin this medication the day you return home from surgery. This anti-inflammatory is used to reduce swelling and decrease pain. You will take this anti-inflammatory daily for 3 months after surgery, even if you are not experiencing pain or have visible swelling. While you are taking your anti-inflammatory, do not take other NSAIDs such as advil, aleve, ibuprophen, or motrin. If need an over the counter medication for pain you may take Tylenol (acetaminophen). If you have an aspirin allergy, do not take NSAIDs. Your prescribed NSAID is one of these listed below:

- Mobic (Meloxicam) 7.5mg: Take one tablet daily for pain and inflammation.

OR

- Celebrex (Celecoxib) 200mg: Take one tablet, twice a day for pain and inflammation

2. Antibiotic: begin this medication the day you return home from surgery. This is used to prevent post operative infection. It is important to take the full prescription for full efficacy as well as to decrease the chance of developing a resistance to the medication in the future. Antibiotics can cause stomach upset, including diarrhea. To combat this you can increase your intake of yogurt or take a probiotic that can be purchased from your pharmacy. Note that some antibiotics alter the efficacy of birth control pills, so women using oral contraceptives should use a back up method for the remainder of the cycle. Women can also experience yeast infections related to antibiotic use.

If this occurs it can be treated with over the counter medication. Your prescribed antibiotic is one of these listed below:

- Keflex (cephalexin) 250mg: Take 1 tablet 2 times per day for 10 days. Do not take this medication if you are penicillin allergic.

OR

- Cleocin (clindamycin) 300mg: Take 1 tablet 2 times per day for 10 days.

- 3. Pain Killer:** begin this medication the day you return home from surgery on an as needed basis. A narcotic is used to decrease the expected pain and discomfort post surgery. Be aware that narcotic pain medications can cause nausea, constipation, and drowsiness. Do not consume alcohol or drive a vehicle while taking this medication. To avoid constipation you can use an over the counter fiber supplement such as Metamucil or Citrucel. If you do not want to take this medication, over the counter extra strength Tylenol is also an effective pain reducer. You may take this medication along with your anti-inflammatory. Taking a pain killer on a regular basis can cause constipation. The pain medication you have been prescribed is:

- Vicodin (Hydrocodone) 5/300mg: Take 1-2 tablets every 4-6 hours as needed.

#### Physical Therapy:

- A prescription of physical therapy will be given to you at your first post-op visit. This prescription will outline any restrictions you will have.
- Be prepared to begin therapy immediately after your first post-op visit.
- We suggest therapy 2-3 times per week for the first 12 weeks after surgery. Your therapist will show also give you home exercises to do.
- Many therapists book in advance, it is a good idea to schedule several post-op visits for therapy ahead of time so that you can reserve the time and dates that work for you.

#### Follow-up visits:

Your first 3 post-op visits were scheduled by our front office staff prior to surgery. Appointments roughly mirror the below schedule but are subject to change at the discretion of the clinical staff:

Appointment #1: 1-3 days post-op for a dressing change, surgical site assessment, and physical therapy guidelines;

Appointment #2: 2 weeks post-op to have steri-strips changed, stitches removed, and to assess your progress;

Appointment #3: 4-5 weeks after surgery to assess progress;

Appointment #4: 12-14 weeks after surgery to assess progress and discuss appointment schedule moving forward.