Brandon J. Barnes, M.D. | Orthopaedic Surgeon, Sports Medicine Specialist www.osswf.com (239) 334-7000

Post-Op Instructions for Shoulder Replacement

DIET

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

WOUND CARE

- Maintain your operative dressing until your first post-operative visit.
- If the outer dressing falls off or is removed keep surgical mesh/glue in place, do NOT peel
 off.
- The bandage is water resistant, and you may begin showing postoperative day 3.
- NO immersion in a bath until given approval by our office.

MEDICATIONS

- Local anesthetics are injected into the wound and knee joint at the time of surgery. This will
 wear off within 8-12 hours. Patients commonly encounter more pain on the first or second
 day after surgery when swelling peaks.
- Most patients will require some narcotic pain medication for a short period of time this can be taken as directed on the bottle.
- Common side effects of the pain medication are nausea, drowsiness, and constipation. To
 decrease the side effects, take the medication with food. We recommend a stool softener
 such as Colace (docusate) available over the counter and be sure to drink plenty of water.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medications changed.
- Do not drive a car or operate machinery while taking the narcotic medication.
- Please avoid alcohol use while taking narcotic pain medication.
- If you are having pain that is not being controlled by the pain medication prescribed, you may
 take an over the counter anti-inflammatory medication such as ibuprofen (600 800mg) or
 naproxen in between doses of pain medication. This will help to decrease pain and decrease
 the amount of narcotic medication required. Please take as directed on the bottle.

ACTIVITY

- Your sling is to be worn for 6 weeks following surgery day and night.
- Begin elbow and wrist motion exercises (active elbow extension/flexion without resistance)
 24 hours after surgery unless otherwise instructed.
- While maintaining your elbow by the side, begin elbow, hand, and wrist exercises immediately.

- Formal physical therapy (PT) typically begins after you are seen at your first post-operative appointment 2 weeks after surgery. A prescription and protocol will be provided at your first post-op visit.
- When sleeping or resting, inclined positions (i.e., reclining chair) and a pillow under the forearm for support may provide better comfort.
- Avoid long periods of sitting (without arm supported) or long distance traveling for 2 weeks.
- NO driving until instructed otherwise by physician.
- May return to sedentary work ONLY or school 3-4 days after surgery if pain is tolerable.

SLING IMMOBILIZER

- Your sling immobilizer should be worn at all times except for hygiene and exercise.
- Your sling is to be worn for 6 weeks following surgery.

ICE THERAPY

- Icing is very important in the initial post-operative period and should begin immediately after surgery.
- Use icing machine continuously or ice packs (if machine not prescribed) for 20-30 minutes every 2 hours daily until your first post-operative visit. Avoid frostbite to the skin by not using icepacks for more than 30 minutes at a time.
- You do not need to wake up in the middle of the night to change over the ice machine or icepacks unless you are uncomfortable.

EXERCISE

- No exercises or shoulder motion until after your first post-operative visit unless otherwise instructed.
- You may begin elbow, wrist, and hand range of motion on the first post-operative day about 2-3 times per day.
- Formal physical therapy (PT) will begin after your first post-operative visit.

EMERGENCIES - Contact Dr. Barnes' office at (239) 334-7000 if any of the following are present:

- Painful swelling or numbness (note that some swelling and numbness is normal)
- Unrelenting pain
- Fever (over 101° F it is normal to have a low grade fever (<100°) for the first day or two following surgery) or chills.
- Redness around incisions
- Continuous drainage or bleeding from incision (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting

If you have an emergency that requires immediate attention proceed to the nearest emergency room.