

Post-Operative Instructions
Open and Arthroscopic Assisted AC-Joint Reconstruction
Wesley K. Cox M.D.

Surgical Dressing:

1. A sterile operative dressing has been applied to your shoulder. If possible, we prefer that it not be altered or changed for the first 48 hours following surgery. If it comes loose or is soiled, then it may be changed.
2. The shoulder is filled with water to perform your surgery. It is normal for the shoulder to drain/ooze water for the first day or so. This is usually blood-tinged so don't be alarmed. If you have questions, please call.
3. You may begin showering on the second post-operative day, but you should cover the incisions in the shower. Get in the shower with the dressing in place and shower normally taking care to limit the movement of your arm as instructed. After the shower, remove the dressing entirely. You will find several small surgical incisions and one slightly larger incision over the top of your shoulder. Pat the shoulder dry and place regular band-aids over each incision. You may then change the band-aids daily after showering. If steri-strips are present, do not remove them. They will fall off within a week or so.
4. Do not soak the shoulder in bathtub, hot tub, or pool until told it is ok in clinic. Do not expose the wounds to any creek, lake, river, etc. for at least 1 month.

Diet:

As tolerated you may resume a normal diet at your own pace. We advise though that the day of surgery you avoid any heavy meals. Our recommendation is that you begin with a liquid diet the day of surgery, and advance as tolerated. It is not uncommon to have nausea after the surgery because of the pain medicine and anesthetics used during your surgery, so be careful with what you eat and go slowly.

Sling/Immobilizer:

We will give you instructions on your limitations and restrictions as you move along. Your sling helps maintain the correct position of your acromioclavicular joint while it heals. You should wear it at all times except in the shower. It is important now, however, that you move your elbow, hand and wrist to reduce swelling and prevent stiffness. You should not do any pushing, pulling, or lifting with your operative arm. Nothing heavier than a coffee cup should be held in your operative arm until we see you back in clinic unless otherwise stated.

Medications:

Patients' medication requirements vary after surgery. You have given medications for pain, nausea, and constipation prevention. Take the pain medicine

if you need it, if you take it, take the stool softener as instructed. Take the nausea medicine if you need it.

Numbing medicine (local anesthetic) has been placed in your shoulder at the conclusion of your surgery. Additionally, a nerve block may have been performed by the anesthesiologist. It is normal to have some level of discomfort after any surgery. If you have no pain or minimal pain, then it likely means the numbing medicines are working. It is important that you take pain medicine as the numbing medicine starts to wear off, this will prevent you from having extreme pain once it's worn off completely. If you are awake and alert, take one pain pill every 4 hours until the numbing medicines have worn completely off. Do not take the medicines if you are excessively drowsy. This helps prevent the pain from "piling up" and will significantly limit the amount of pain medicine you require in the following days.

If you have any allergies, or develop any adverse reactions to any of the medicines prescribed for you DO NOT TAKE THEM. Call and adjustments can be made.

Although they may help control your pain, medicines like Advil, Motrin, or similar anti-inflammatories should not be taken for the first month after surgery as they can slow healing. The medicine you have been prescribed for pain likely has Tylenol in it--DO NOT TAKE ADDITIONAL TYLENOL. I advise you to talk with your pharmacist regarding potential drug interactions with other medications you are taking prior to taking any new medicines including those written for you for this surgery.

Ice:

Controlling swelling is one of the best ways to control pain. If an ice machine has been given to you use it as instructed. Remember to always keep a towel, t-shirt, or sheet between the ice pad and your skin. If this is not done, your skin can become frostbitten.

If you do not have an ice machine you may use ice packs, gel-packs, or similar cold therapy. In general, I recommend 2 hours on, on one hour off. Remember to keep something between the ice and your skin.

Concerns:

It is common to have a low-grade fever for the first 24-48 hours after any surgery. If you have a fever that does not respond to Tylenol or that is >100.5 you should call. If you have any other signs of symptoms of infection you should call. While the risk of blood clots following shoulder surgery is very low, we still recommend that you ambulate as normally as possible. We also encourage doing ankle pump exercises while in bed for the first few days following surgery. Of course, if you have any questions or concerns, I would rather you call than worry.

Follow-Up:

In general, you will be seen in clinic 7-10 days following surgery. Your appointment may be scheduled prior to your surgery, if not please call to arrange it.