



ADVANCED
ORTHOPAEDIC
SPECIALISTS

Post-Operative Instructions
Arthroscopic Stabilization for Glenohumeral Instability

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 24 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. The day after your surgery you may 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 (up to 5) small surgical incisions with sutures. Pat the shoulder dry and place regular band-aids over each incision. You may then change the band-aids daily after showering.
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:

The tissues that provide stability for your shoulder have been repaired. However, these repairs can be torn and disrupted before they heal if the shoulder is moved improperly, and it is most vulnerable during the first six weeks after surgery. We will give you instructions on your limitations and restrictions as you move along. For the first week at least, I want very little shoulder motion. It is important, however, that you move your elbow, hand and wrist to reduce swelling and prevent

stiffness. Absolutely no pushing, pulling, or lifting with your operative arm. Nothing heavier than a coffee cup should be held in your operative arm.

You may remove the immobilizer to shower, but it should be worn full time otherwise including sleeping. To shower, have someone help you remove the immobilizer. Keep your arm at your side as if you're holding a newspaper between your arm and side. It is ok to straighten your elbow as this does not move your shoulder.

To clean your armpit, lean forward bending at the waist. As you do this, your arm will fall away from your side enough to allow you to wash. Doing it this way allows you to wash your armpit without stretching the tissues I repaired during your surgery. Have someone help you get dressed then re-apply the immobilizer over your clothes.

Medications:

Patients' medication requirements vary after surgery. You have been 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 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.

I recommend against taking Advil, Motrin, or similar anti-inflammatories. While these can help with pain, they may also slow healing during the first several weeks after surgery. 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.

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 is very low following shoulder surgery, we still recommend that you ambulate as normally as possible immediately. Also, we encourage you to do 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 should be seen in clinic within the first 7-10 days following surgery. Your appointment may be scheduled prior to your surgery. If you have questions regarding your follow-up appointment, or to schedule one, please call the clinic.