

Post Operative Instructions

Total Shoulder Replacement and Reverse Shoulder Replacement; Shoulder Fractures

In general, rehabilitation after shoulder surgery can be divided into three phases:

Phase 1 consists of the first few weeks after surgery and involves decreasing swelling and inflammation after the operation while protecting the repair/replacement. You will initially keep your immobilizer on most of the time and ice the shoulder as much as possible. At your first office visit, I will teach you some gentle exercises (elbow and hand range-of-motion, gentle pendulum exercises and arm circles, and some passive shoulder motion) to start regaining motion.

Phase 2 consists of regaining motion. During this phase you will be out of the shoulder immobilizer and focusing on stretching the shoulder. The goal of Phase 2 is to regain about 80% of your motion by 3-4 months after surgery (stiffness is the most common complication after shoulder surgery, so don't be discouraged if you become stiff during this time period). I will show you several stretches in the office that you can do at home, on your own, and we will consider if formal physical therapy is appropriate.

Phase 3 consists of getting the strength back in the arm and getting the shoulder "back to normal." This time period continues until about 1 full year after your surgery. We may have you participate in a formal physical therapy program during this time – it takes 3 months for the tissues/fracture to heal, which is the priority, so strengthening begins after the healing and motion have completed.

What to Expect Immediately after Surgery:

- Swelling:** Ice the shoulder for 20 minutes every two hours for the first 2-3 days after surgery. If you received an 'ice machine,' use this as much as possible.
- Bandage/Immobilizer:** The bandages can be removed the day after surgery and replaced with dressings you will receive from the hospital. You will use the immobilizer for 4-6 weeks depending on the extent of your repair or depending on whether you had an anatomic or reverse shoulder replacement. For anatomic shoulder replacements, you may take the immobilizer off and use the hand/arm to eat your meals and drink your drinks after your first follow-up visit.
- Exercises/Range of Motion:** In the hospital, you will be taught a few exercises and stretches. These will be continued at home with the home health agency; the goal is to start regaining motion.
- Medications:** Do NOT take any anti-inflammatory medications (ie: Advil, Aleve, Motrin) unless instructed by Dr. Walker. Also, do not take any additional Tylenol/acetaminophen if your prescribed pain medication contains Tylenol (acetaminophen or APAP). Take your pain medication as directed. Narcotics can cause constipation; you may need to use a laxative and/or stool softener.
- Eating/Showering:** Your first meal should be clear liquids only (water, tea, broth). If you tolerate that, progress to regular food at your next meal. You may shower if you can keep the wounds dry: place a waterproof bandage over the wound and face shower so that the water does not hit your arm. If you can't keep the wound dry, then wait until the staples/stitches have been removed.
- Driving/Returning to Work:** You may drive when you are off narcotic pain pills and feel safe driving. Use your judgment and be safe. Return to work depends on what you do. If you work at a desk job or in a supervisory role, you may return as early as 1 week after surgery. If you do heavy lifting or overhead activity you may need more time off. It takes 3 months to heal these fractures and

to protect these replacements, so therapy will be focused on range of motion and gentle strengthening only until this time.

Caring For Incision:

Keep your incision clean and dry. Do not apply any lotions to the wound.

Follow-up Appointment:

If there is no appointment time and date written on the line above, please call office (804) 288-3136 and ask for The Walker Team to make an appointment 10-12 days post op.

Therapy:

Need for therapy will be determined on a case-by-case basis. Protocols are given to home therapists and to outpatient therapists based on your operation.

Symptoms to Report:

Notify Dr. Walker's office immediately if you develop any of the following:

- Fever above 101.5 degrees Fahrenheit
- Nausea or vomiting
- Inability to urinate or urinary incontinence
- Changes in sensations in your arms/legs
- Pain not relieved by medication
- Redness and or excessive swelling
- Drainage from incision

We are here to help. Feel free to contact our office anytime to ask any questions or concerns. Call (804) 288-3136 and ask for "The Walker Team." You may also reach us by email through the Patient Portal System (Oberd) or by going on to our website www.virginia shoulder.com.