PEACHTREE ORTHOPEDICS

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# POST OP REVERSE SHOULDER REPLACEMENT SURGERY *v1.0*

You are recovering from reverse shoulder replacement surgery. The following instructions are to help make your recovery as rapid and successful as possible. This information is designed to answer some of the most frequently asked questions regarding what to expect and what to do after arthroscopic shoulder surgery. These are general guidelines, if you have any questions or concerns, please call our office. 24/7 -404-355-0743.

1. Keep your arm in the sling at all times and remove only for clothing changes and showers. When you remove your arm from the sling, please keep it at your side and use your good hand to support your operative arm as needed. Wear your sling while sleeping. Most patients find that sleeping in a recliner for a few days allows them to find a comfortable position.
2. Use your cooling cuff as needed during waking hours. If you are not using a cooling cuff, it is recommended that you ice your shoulder 30 minutes on/off for the first 3-5 days after surgery to help with pain and swelling.
3. You will have a water-proof dressing over your incision called an Aquacel dressing. After 48 hours you may shower with the dressing in place and pat dry. This Aquacel dressing can stay in place for 1 week and then you can remove it and leave your incision open to the air. You may leave your shoulder open to the air except when using your cooling device. If using a cooling device, make sure there is a towel or shirt between the cooling cuff and your shoulder's skin to prevent frostbite. After 1 week, you may shower without any dressing.
4. Postoperative bleeding is not unusual. Reinforcing your dressing with additional gauze pads can be helpful. If you have concerns about the amount of bleeding or drainage, please call our office.
5. Your postoperative therapy begins on the day of surgery. Initially, you should perform wrist and finger range of motions several times a day. You are encouraged to work on elbow range of motion exercises with your arm at your side to prevent elbow stiffness. You should avoid internal rotation of the shoulder behind your back.
6. Postoperative pain is common but should be controlled by the prescriptions given to you. Narcotics frequently cause itching and this can be treated with a non-drowsy over-the counter antihistamine (Zyrtec, Allegra, Claritin etc…) or Benadryl if needed. Narcotics will also cause constipation. If you are using a narcotic pain medication, it is recommended that you take an over-the-counter stool softener daily, such as MiraLAX or Colace. If you have not had a bowel movement in 2 days, you should use a laxative of your choice, such as Dulcolax, to help facilitate a bowel movement.
7. Anti-nausea medication, such as Zofran, is often prescribed. Take this medication as needed.
8. You should take one 81 mg aspirin (baby aspirin) twice a day for 30 days to reduce the possibility of blood clots.
9. You should take 1000mg of Tylenol (2 extra-strength tablets) with 400mg of Ibuprofen (2 tablets) together every 8 hours with food for the first 5 days after Surgery. Do not take Tylenol if you have a history of liver disease or allergy. Do not take Ibuprofen if you have history of gastric ulcers or kidney disease.
10. Call your doctor's office for any fevers greater than 101.5 F or present to the ER for chest pain, shortness of breath, or any other concern.
11. You will be seen in the office 3-5 days after your surgery. Please call my clinical assistant – Sarah Williams ATC if you do not already have an appointment – 404-355-0743 ext 1615