



Seacoast Orthopedics

Over 30 years of dedication to outstanding patient care

Shoulder Arthroscopy Post-Op Discharge Instructions

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What to Expect: It is normal to feel tired and washed out after surgery. Rest is important, but walking is also important to prevent problems and to regain your strength and energy. Pace yourself according to how you feel. Rest when you feel tired.

You may have a sore throat if you have had general anesthesia. This is normal and will go away in 1-2 days.

If you have a nerve block, the local anesthetic may keep your arm numb for up to 24 hours.

Your arm can remain painful and swollen for several weeks time, depending on the problem you have and the amount of surgery that was done. You may experience some bruising around your incisions. You should elevate your arm as often as possible to minimize the swelling.

Pain Management:

You can expect to have pain for the first week or so after surgery. The pain is often worse at night. You will be given a prescription for pain medication upon discharge from the hospital. **This will be sent electronically to the pharmacy on file.** You should take this narcotic pain medication as directed for moderate to severe pain. You should take your pain medication with food. If you cannot tolerate this pain medication because of nausea or itching, please call the office. You should call the office for a refill several days before you run out of pain medication. **Refilling your new prescripion may take 2-3 business days.** Narcotics will not be refilled by the on-call physician after hours or on weekends.

For mild pain, you may take acetaminophen (Tylenol). (However remember that medications such as Percocet, Vicodin, and Tylenol #3 contain acetaminophen and you should not take more than 3000 mg of acetaminophen daily.)

Many patients find that lying down accentuates their discomfort. You might sleep better in a recliner, or propped up with multiple pillows in bed. A pillow placed behind your elbow may also help.

Pain medication can cause constipation. To make it easier to have a bowel movement you should drink extra fluids, eat foods high in fiber, or take a stool softener such as colace. Pain medications can also cause itching of the skin. For mild itching you can take Benadryl.

You should not take non-steroidal anti-inflammatory medication like Motrin, Advil, Ibuprofen, Aleve or Naprosyn for the first 4 weeks after surgery as these may impair tendon healing.

Do not drive, drink alcohol or make important decisions while taking narcotic pain medication. Please call your doctor if the pain medication is not working.

Treatment of Nausea: If you received a Scopolamine patch (behind your ear) in the hospital, leave it in place for 24 hours. Be sure to wash your hands immediately after taking it off.

If you are nauseous or vomiting limit your intake to clear liquids only, and advance diet as tolerated. If still nauseous or vomiting after 12 hours, please call the office.

Dressing: Keep your dressing clean and dry. Your dressing can be removed in 3 days. You may remove the bandages but **leave in place the underlying white/yellow steri-strips**. You should keep the incision clean, dry, and covered with a dressing for the first 2 weeks after surgery. You should change the dressing as needed.

You may shower after 5 days letting water gently wash over the incision, but do not scrub the incisions or submerge it in a pool or bath. Do not submerge the incisions in water until directed by your surgeon after the skin is fully healed. Antibiotic creams or other ointments should not be used

Your sutures are typically under the skin and will dissolve on their own, or they will be removed 10-14 days after surgery.

Sling: You should wear your sling at all times including while sleeping until directed by your surgeon. You may remove your sling for hygiene purposes, while being careful to avoid moving your shoulder while doing so. Duration of sling use will vary dependent upon the nature of your surgery. When sitting in a controlled environment you can take the sling off as long as the arm is well supported by pillows.

Icing:

Apply ice bags or use the cryotherapy device you were given to control swelling. Ice should be applied 30 minutes at a time every hour or two. Put a thin towel or T shirt on your skin if using ice in a plastic bag. Icing is most important in the first 72 hours, although many people find that continuing it lessens their postoperative pain weeks after surgery.

Exercises: Perform wrist and grip exercises by moving the wrist and fingers as well as gently squeezing a stress ball or tennis ball.

A prescription for physical therapy will be given to you at your first post operative visit. Your physical therapy program is important to a successful outcome.

What Activities am I allowed to do at Home:

You should not use the operative arm for any lifting or activities other than the above listed exercises.

You should plan on taking some time off from work. You can resume work when the pain and swelling subside (this can be a few weeks or more depending on what type of work you do and the procedure that was done)

You should drink lots of fluids, and eat light foods at first like toast, crackers, soup and ginger ale.

Avoid smoking or caffeinated drinks as they impair healing.

Postoperative Visit: You should have a follow up appointment scheduled. If you do not, you should call the office the day after your surgery to schedule your post-operative visit.

Plan to wear loose comfortable clothing to your post-operative appointments so that the surgical incisions and shoulder can easily be examined. Often a tank top with a button down shirt on top works best.

When to Call: If you have any trouble breathing or are having chest pain, you should dial 911 right away.

For any of the following danger signs, you should call your doctor's office: fever above 100.6 (after the first day or two – a slight fever can be normal the first day), redness or drainage from the incision, numbness, tingling, or discoloration of the hand, if you have severe pain not relieved by pain medication, or if the numbness/tingling returns after the nerve block has worn off.