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Post-Operative Instructions Following Total Shoulder Surgery

1. When do I come in for my first post-operative visit?

If an appointment has not already been scheduled, please call the office the day following surgery to schedule an appointment for approximately 10-14 days after your surgery.

2. What should I expect after surgery?

After surgery, it is normal to experience some discomfort. You will be discharged on post-op day #1 after you've received your 3 doses of antibiotics, had an evaluation by a physical therapist and have met the discharge criteria. You should have received medicine prescriptions from the nursing staff at the hospital. Please fill the prescriptions and use the medications regularly as directed. You will be given a peripheral nerve block prior to surgery which will last up to 12-24 hours. It is important to start your medications before the block starts to wear off. Your post-operative regiment of medications will include:

- Celebrex 200 mg 1 tablet once a day
- Neurontin 100 mg 1 tablet three times a day for 2 weeks
- Tylenol 1000 mg 1 tablet three times a day for 2 weeks
- Oxycodone 5 mg 1 tablet every 4 hours as needed for moderate to severe pain
- Ondansetron 4 mg 1 tablet every 6 hours as needed for nausea
- Colace 100 mg Twice a day for 2 weeks for constipation

A low-grade temperature (99-101 degrees F) is common. Please call the office at (703) 970-6424 if your temperature is consistently elevated over 101.5 degrees.

Eat a bland diet for the first day after surgery. Progress your diet as tolerated. Constipation may occur with narcotic usage. You can try taking Colace or Miralax over the counter as directed. Please contact our office if you continue to experience constipation.

Please call our office at (703) 970-6424 immediately if you experience excessive bleeding or pus like drainage at the incision site, uncontrollable pain not relieved by the pain medication, excess swelling or redness at the incision site, a fever above 101.5° not controlled with Tylenol or Motrin, shortness of breath or any foul odor or blistering from the incision site.

3. What should I do if I have any paperwork I need filled out?

If you have any type of Family Medical Leave Act (FMLA) or any other type of paperwork, you will need to either fax them to (703) 970-6465 or bring them to clinic. Please be advised that it takes 7-10 business days for all paperwork to be completed.

4. What effects might I notice from the anesthesia?

If you had <u>general</u> anesthesia, some fatigue and lethargy may be noticeable for a day or two. Occasionally, nausea may occur. Eating light foods will help. Resume your regular diet as the nausea resolves.

If you had a <u>block</u> as well, soreness in the area of injection is common. Ice to this area is helpful in reducing discomfort. Apply it for 15-30 minutes three times a day. The soreness should resolve by three to four days following the surgery. If, by that time, it has not resolved or it is getting worse, please call our office or call the hospital and ask for the anesthesia office.

5. What can I do to help reduce swelling and discomfort?

Limiting your activities and resting with your shoulder elevated above your heart (i.e. sitting upright) are the best methods of reducing swelling and discomfort and will speed up you recovery. You may have a cool therapy device. If this is the case, the company's representative should have provided you with instructions on its proper use. If not, please call their office for assistance. If you cannot reach them, please call our office. Ice may also be used. Fill a plastic bag with ice cubes and place it over the shoulder with a towel between the skin and the ice bag. Leave the ice in place for 15-30 minutes. This may be done every hour while awake. Sleeping on your back with the head of your bed raised to ≥ 30 degrees or sleeping on the non-operative side will reduce discomfort at night. You may also want to take pain medication before going to sleep.

With regard to your activity level, use common sense as your guide. Painful activities are to be avoided. Limit shoulder activities to those suggested by me or your therapist.