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Patient name:

Date of Surgery:

Surgery performed:

Tyler McGregor, DO
General Orthopedics and Sports Medicine
South Bend Orthopaedics

Discharge/Post-operative Instructions: Shoulder Arthroscopy
Repair of Humeral Avulsion Glenohumeral Ligament
(574) 247-9441

POST-OPERATIVE/RECOVERY PHASE

Activity/motion:

- Refer to your physical therapy protocol.

Wound care:

- Bandages should be kept clean and dry to prevent infection. If dressings get wet or dirty, they must be replaced with new, clean dressings. Contact the office if this occurs.
- Some amount of bleeding can be expected on the dressings after surgery. If your dressings become saturated with blood, please contact the office at the above number for further instruction.
- SPF 30 or greater is recommended over the incisions for the first year to minimize darkening of the scar.

Showering:

- May be done immediately if the dressings can be kept entirely clean and dry throughout the process.
- Dressings should be kept on your shoulder and maintained until 3 days following surgery
- After dressing removal, you may shower with waterproof bandages placed over the incisions and steri-strips such that no water can make contact with the incision. After showering, waterproof bandages may be removed and clean, dry dressings may be re-applied.
- **Do not submerge the shoulder underwater in a bath, swimming pool or any other body of water until the incisions are completely healed, typically 4-6 weeks following surgery.** Premature submersion may lead to infection.

Ice/Cold Therapy:

- Used to minimize pain and swelling after surgery.
- Ice should be applied in cycles of 20 minutes on, 40 minutes off for the first 72 hours following surgery. Ice can also be used after doing physical therapy and home exercises if swelling is persistent.
- Do not apply ice directly to the skin.
- If an ice machine was prescribed or is available for your use, follow the recommendations specific to that machine.

Pain Medication:

- Narcotic Pain Medication is best utilized for acute pain and for short durations. It is given to allow for tolerable discomfort.
- ONE prescription of narcotic pain medication is typically sufficient after these procedures. Hydrocodone/acetaminophen (7.5/325 mg) may be taken 1 time every 6 hours as needed for pain. A maximum of 4 tablets may be taken each day. Approximately 20 tablets will be prescribed in total.
- Common side effects of narcotic medication include: flushing, dizziness, nausea, drowsiness, constipation, delirium. If you are using narcotics, minimize constipation by drinking adequate amounts of fluid and consuming a high-fiber diet. A stool softener such as docusate and/or a GI motility agent such as senna may be purchased over the counter as well.
- DO NOT operate a motor vehicle or heavy machinery while under the influence of narcotic medication.
- Alternatives to narcotic pain medication include ibuprofen (600 mg every 6-8 hours) and Tylenol. You may take ibuprofen in conjunction with Norco if you are having breakthrough pain. **Tylenol is not to be taken with Norco.**

Minimizing Risk for Deep Vein Thromboses (DVT, blood clots)

- Blood clots in the extremities (DVT) or lungs (pulmonary embolism- PE) are possible after having surgery due to decreased mobility. If a blood clot travels out of the extremities and into the lungs, it can be a serious and life-threatening condition. Concerning symptoms include calf pain, leg foot and swelling, shortness of breath, increased breathing or heart rate and fever.
- Mechanical methods for preventing DVT include contracting (flexing) the muscles of the legs, including the calves, quadriceps and gluteals. These should be done 10-15 times per hour while awake.
- Compressive TED stockings may be placed on your legs after surgery.
- Aspirin 325mg is recommended once per day for 4-6 weeks following surgery. Patients with allergies sensitivities or other contraindications to aspirin or other anti-coagulation agents should not take aspirin and should consult with their surgeon and/or primary doctor.
- Contraceptive medications should be temporarily suspended for 6 weeks after surgery.

TRANSITION TO ACTIVITY

Return to Driving:

- You **must** be off of narcotic pain medication to resume driving.
- You must wait until you can effectively move your arms to be positioned to “10 and 2” on the steering wheel and your shoulder has good range of motion.
- You must feel safe and comfortable behind the wheel. You must be confident in moving the steering wheel in all directions and be able to safely maneuver the vehicle.

Returning to Work/Sports:

- Returning to work/sports is largely dependent upon time from surgery, physical therapy progress and the specific occupational responsibilities and duties.
- Laboring jobs/sports may require 6-9 months to recover/rehabilitate before returning to regular duty/play.



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- Low physical demand jobs may take anywhere from 4 weeks to several months for a return to work
- Sedentary work may be resumed after your first post-operative appointment.

POST-OPERATIVE VISITS

Physical Therapy:

- Recommended to begin within 3-5 days following surgery.
- Typically 2-3 times per week. However, frequency and duration of therapy visits is often based on patient needs and should be discussed with the Physical Therapist.
- Plan on also participating in a home exercise program on a daily basis. This will also be coordinated by your Physical Therapist.

Post-op Visit 1

- Within 14 days following surgery. Suture removal and clinical check to assess gentle range of motion and incision healing.

Post-op Visit 2+

- Approximately 6 weeks following surgery. Assessment of shoulder range of motion and strength. Depending on progress with physical therapy, return to work/sports will be planned accordingly.

OTHER FREQUENTLY ASKED QUESTIONS/ CONCERNS

Dental Work:

- Preoperatively, routine cleanings should be avoided within 3 days of surgery.
- Post-operatively, please schedule routine cleanings for at least 14 days after surgery.
- No antibiotic prophylaxis is needed for dental cleanings/procedures following this surgery.

Worrisome Symptoms:

Please contact the office at **(574) 247-9441** if you are experiencing any of the following:

- Redness
- Foul Odor
- Abnormal warmth of the joint/surgical site
- Shortness of breath
- Chest pain
- Excessive Swelling
- Numbness or tingling