

## DISCHARGE INSTRUCTIONS FOR SHOULDER REPLACEMENT SURGERY

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Please reference [www.markayzenberg.com](http://www.markayzenberg.com) and go to “Patient Resources” and then to “**Instructional Videos**” for some videos that may apply to your care after surgery. Please note: not all surgeries will have instructional videos to review.

### ACTIVITIES:

1. Rest and relax today. Do not resume usual activities.
2. You may not bear any weight on your arm. Do not actively (using your own strength) move your shoulder at all. You may use gravity to help move your arm away from your body to wash your armpit.
3. **Exercises:** For the first week until your initial post-op visit, you should slowly perform the following exercises 3-4x daily to minimize stiffness and upper back pain: shoulder shrugs, bend and straighten your elbow and squeeze the stress ball attached to your sling.
4. **Sling/brace:** You may remove your sling throughout the day to do the exercises noted above, or for short periods if you are in a *controlled environment* (ie. No pets, kids, etc that may cause you to accidentally move your shoulder) as long as you are awake and **sure** you will not accidentally move your shoulder on your own. Otherwise, keep the sling on. **The sling stays on at all times when sleeping or napping and should be on most of the time throughout the day as well.** Your sling will likely be discontinued at 5-6 weeks post-operatively.
5. If you had a **reverse** shoulder replacement, please keep your arm in line or in front of the plane of your body if your sling is off (ie. Keep your elbow from moving backwards behind the middle of your torso) as this poses a risk of dislocation, especially early after surgery.
6. No strenuous activities. No sports, gym or work until discussed at your first postoperative visit.
7. Driving will vary with every patient and should be discussed in the office before attempting.
8. You may be most comfortable sleeping in a recliner or in bed with pillows propped up behind your shoulder.
9. Please start physical therapy 7-10 days after surgery unless otherwise instructed by your surgeon – a PT script and custom protocol will be provided at your first post-visit.
  - a. It is important that you attend each session to attain the very best surgical outcome.

### CARE OF OPERATIVE SITE:

1. **Dressings:** Your surgical dressing will be applied while in surgery – please maintain this dressing in place until 7-10 days later when you see Dr. Ayzenberg. This dressing has multiple layers with the top layer being a clear plastic. As long as that plastic layer is **completely** intact and not peeling away, it is waterproof and you may shower beginning 2 days after surgery.

- a. Your dressings will be removed 7 days after surgery by Dr. Ayzenberg.
  - b. Do not apply any antiseptic ointment or medicine to the incisions. Do not swim, take tub baths, or use a whirlpool until instructed by Dr. Ayzenberg.
  - c. Some bloody drainage on the dressing is to be anticipated after surgery. If it comes around the dressing, then it is no longer waterproof – please let Dr. Ayzenberg know for instructions on how to change it.
  - d. Swelling and bruising throughout the entire arm is normal.
2. **Showering:** Showers are acceptable after 48 hours as long as that plastic layer of the dressing is **completely** intact and not peeling away; no use of bathtubs or Jacuzzi.
- a. It is important to still wash your armpit. To do this, you may lean over to the side and let gravity move your arm away from your body. **DO NOT** move your shoulder using your own strength, as this may cause injury.
  - b. You need to keep your incisions dry. After showering, make sure that you dry the shoulder area. After your first post-operative visit, you may begin to shower without any dressings or covers on your wounds.
  - c. Remember, you may wash/apply deodorant to under arm by slightly leaning to the side. This opens up the area without actively lifting your arm.
3. **Swelling:** Swelling is common to experience especially around the shoulder joint. This may cause stiffness and discomfort. This may last for several weeks after surgery. To minimize the swelling, utilize the cryocuff cold therapy unit (if obtained) or ice packs.
- a. Cold therapy should be used as often as possible, especially for the first 48 hours. Run the cold therapy unit/place ice packs for 2 hours on then 1 hour off, except while asleep, regularly the **FIRST** 48 hours.
  - b. After 48 hours, run the cold therapy unit/place ice packs for 30 minutes on and 30 minutes off as much as possible until your post-operative appointment. Make sure to protect your skin by placing a towel between the pad/ice pack and your skin once the bandages have been removed.
  - c. Cold therapy can be used 3-4 times daily to control pain and swelling throughout your recovery. This may be used as needed for your comfort.
4. **Signs of Infection:** With any surgery it is important to be aware of signs of infection, which can include: unusual looking incision such as increased redness or smell, drainage to be green or yellow, and increased fever. It is normal to have a slight temperature post operative, but above 101.5 degrees; you should contact our office.

## **MEDICATIONS:**

1. **Take one 81mg aspirin daily for 3 weeks after surgery, unless you have an aspirin sensitivity/allergy or asthma.**
2. Resume your medications and take any prescribed medications that have been added to your medication list. Your medication list is being sent home with you.
  - a. Take your pain medication with food to avoid any nausea or vomiting.
  - b. Dr. Ayzenberg prefers you avoid any NSAIDs such as Ibuprofen (Advil), Motrin, Naprosyn, etc for the first 6 weeks after surgery. Once you no longer require narcotic pain medication, please use Tylenol alone.
  - c. Pain medication may cause constipation. If this occurs, please increase your fluid intake (prune juice). You may also try over the counter stool softeners or laxatives.
    - i. Stool softener: Colace twice a day as directed.
    - ii. Laxatives: Milk of Magnesia as directed. (takes several hours to work).

- iii. Benadryl: You may utilize Benadryl as needed for itching.
3. In addition to the pain medication, you may take over-the-counter non-steroidal anti-inflammatories (NSAIDs) to control your pain and swelling beginning 10 days after your surgery, as long as you do not have any kidney problems, bleeding problems, or other reasons your doctor does not want you to take NSAIDs.
  - a. You may take Motrin by mouth every 8 hours with food **or** Aleve by mouth every 12 hours with food.
  - b. If your surgeon has placed you on a prescription anti-inflammatory prior to surgery, you may take that medication instead of the over-the-counter Motrin/Aleve.
  - c. If you are already taking blood thinners, such as Coumadin or Plavix, these medications should not be combined with non-steroidal anti-inflammatories (Advil/motrin/ibuprofen, Mobic, Aleve, Aspirin, Celebrex, Naproxen, and Voltaren).
  - d. If taking a blood thinner prior to surgery, call your prescribing physician to see when you are to restart your medication.

### **ANESTHESIA:**

1. Patients may experience nausea for the first 24 hours after surgery due to the anesthesia received.
2. Most patients receive an Inter-scalene block for additional pain control during surgery and post-operatively.
  - a. This numbing medication lasts for up to 36 hours before abruptly wearing off.
  - b. You may experience some numbness/tingling or burning in your fingers during the first 24-48 hours after surgery.
  - c. Be sure to take your pain medication as directed to avoid severe pain when the block wears off.
  - d. To avoid limb injury, use the sling until you have no numbness and full control of movement in your hand and fingers.

### **POST-OP VISIT:**

1. Your first post-operative visit will be 10-14 days after surgery with Dr. Ayzenberg.
2. Please call the office the day after surgery to make or confirm your appointment. The phone number is: (215) 745-4050.
3. If you experience fevers >101.5F, or calf swelling and pain, or any other unexpected symptoms, please call the office or call service immediately.

### **Emergency Contact**

1. If experiencing a true emergency, please call 911 or go to the ER.
2. Our call service is available for phone calls, which will be answered by a physician.
3. Dr. Ayzenberg provides a cell phone (215-817-9928) specifically for his post-operative surgical patients for them to have the ability to contact him directly with questions. You may text or call that number any time. Please leave a voicemail if calling. **Please note, this cell phone is only checked every other day**, usually in the evening and/or early morning. It is meant to provide a direct line of contact for non-emergent concerns but is rarely answered immediately. To contact him during the day or for a faster response, please call the office.

**Thank you for entrusting Dr. Ayzenberg with your care.**