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Post-op Instructions for Total Shoulder Replacement

These instructions compliment the information given by the nursing staff and Physical Therapists. They cover many common questions.

Wound Care

- Keep tape and glue (Dermabond) in place over incision. Gently trim edges if no longer sticking to skin. **DO NOT REMOVE.** This stays in place for 3 weeks after surgery.
- Cover with dry gauze and tape lightly. A small amount of clear drainage or bleeding is normal. Change dressing daily until dressing is clean and dry for 48 hours. After that time, you may leave the incision open to air.
- You may get the incision wet when showering 3 days after surgery. The shower should be brief and the wound patted dry with a clean towel. Try to keep the direct water spray away from your knee. No baths or soaking the incision until 3-4 weeks after surgery and well healed.
- If you notice purulent drainage (thick white or greenish in color) from the wound, increasing redness, or you have a temperature of 101 or higher, please report these symptoms to your surgeon or the doctor on call.

Pain

- Ice your shoulder as frequently as possible. We recommend 4-5 times per day for 20 minutes per time. You may use either the ice machine given to you at the hospital or simply place ice in a zip lock bag, wrap it in a towel, and place it on the shoulder. Do not apply ice directly to the skin as it may damage the skin if left on for long periods of time.
- Swelling is common after surgery. To reduce swelling, elevation is very helpful. Elevate the hand above the heart level for the first 2-5 days after surgery. Elevation for 30 minutes every 2 hours is a good initial recommendation. Excessive pain and swelling should be reported to your surgeon.
- For baseline pain control, we recommend adults take Tylenol (Acetaminophen) 1000mg* three times a day. If your prescription pain medication also contains Tylenol, you should reduce this. You should not take more than 3000mg of Tylenol in a 24-hour period. You may also supplement your pain medication by taking an anti-inflammatory medication such as Ibuprofen (Advil) or Naprosyn (Aleve) between Tylenol doses (unless you have been told you cannot take these medications, are taking a blood thinner or have a history of or develop stomach ulceration).
- If that is not adequate, prescription strength pain medication may be prescribed for after you leave the hospital. Wean off this medication as your pain allows, continuing the Tylenol and anti-inflammatory as tolerated. Prescription strength medications can cause constipation and you may want to use a stool softener. If a refill is needed, please call the office during regular business hours, Monday-Thursday 8:00 a.m. to 5:00 p.m. Refills will not be made after hours or on weekends, so please plan ahead.

*Tylenol 325mg: 3 tabs every 8 hours OR Tylenol 500mg: 2 tabs every 8 hours

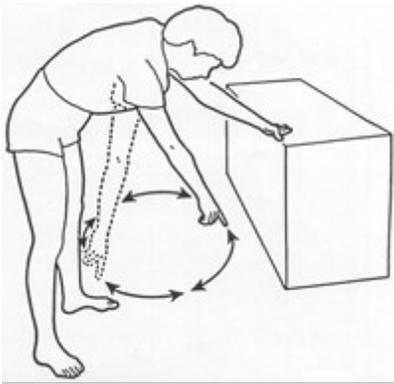
- Most patients are more comfortable in an upright position while sleeping, such as a recliner. You can also use pillows to support your shoulder in bed.

Driving

- To drive you must no longer be taking narcotic pain pills (plain Tylenol is allowed). Also, you must feel strong and alert. You may take your arm out of the sling to hold the bottom of the steering wheel, you should NOT actively raise your arm until cleared by physical therapy. Most people start driving approximately two -four weeks after surgery.

Exercises

- Leave your arm in the sling during the first several days after surgery for comfort. You may take it out of the sling for exercises and showering. You may adjust the sling as needed to make it more comfortable. The pillow underneath the sling can be removed if uncomfortable. Your therapist will help you advance your activity.
- If you are sent home with a shoulder CPM, you are to use it 4-6 hours per day. The machine helps to move the arm and keep it from getting stiff. It may feel strange at first, but as your shoulder begins to relax, it will feel better.
- Upon discharge from the hospital you are encouraged to perform hand, wrist and elbow range of motion exercises 4-5 times per day. These exercises will help to decrease swelling.
- You should also gently perform shoulder pendulums with your waist bent and your arm dangling at your side while making small circles with your hand. You should perform these 2-4 times per day starting the day after surgery. You should not attempt to elevate the surgical arm under its own muscle power. Your Physical Therapist will progress your activity appropriately.



Follow-up

- Make sure an appointment has been scheduled for you at Chippewa Valley Orthopedics & Sports Medicine for approximately 10-14 days after surgery.
- Please call the office with any questions or concerns.

Troy Berg, MD

Chippewa Valley Orthopedics & Sports Medicine

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