

# Discharge Instructions: Total/Reverse Shoulder Arthroplasty

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The US is facing a crisis with opioids to the point that a National Emergency has been declared and new Florida law implemented, so we would like to provide you with some additional information regarding your medications. Opioid medications like Vicodin, Percocet, Oxycodone, Norco, and Oxycontin were created to treat intense pain by blocking receptors in your brain. They can be addictive for some patients even with only short-term use. Florida State law now limits prescriptions of these medications to 3 days. Medications like Tylenol (Acetaminophen), Advil (Ibuprofen), and Aleve (Naproxen) can be very effective in treating post-surgical pain, they work by helping the body reduce inflammation in the area where surgery was performed. These medications were created to treat moderate pain without impairing or addictive effects. You will likely still feel some pain after surgery, but this means that your body is healing. We have outlined your instructions to help improve and control your postoperative pain to tolerable levels.

We will still be providing you with a 3-day supply of opioids, but these are meant to be taken for intolerable pain only. For pain control outside of your prescription, we recommend taking extra strength Tylenol (500mg) every six hours and alternate with Ibuprofen (600mg) every six hours. These can be taken safely together unless you have a contraindication or have been instructed not to take them by your physician. You may have been provided with a prescription for Toradol (anti-inflammatory) for the first 2-3 days. After this, you can take Ibuprofen or another anti-inflammatory of your choice scheduled for the first week postoperatively to maximize pain control and decrease inflammation. The prescribed opioids like Oxycodone should be taken for breakthrough pain only.

## Medications:

- Take the pain medication Dr. Sabesan has prescribed for you. You should also start taking an anti-inflammatory like Aleve, 1-2 tablets every 12 hours, or Ibuprofen, 600mg every 6 hours. This will help with your pain control, healing, and inflammation.
- When taking a narcotic (Percocet, Norco, Vicodin) we recommend you take a stool softener (Colace, Senokot) to help prevent constipation. This can be purchased over the counter. You should also drink at least 6-8 glasses of water and make sure your diet contains fruit, vegetables, and fiber.
- A prescription for Zofran 4mg should be requested if you are experiencing nausea and vomiting after surgery. Your pain medical can also make you nauseated so take it with food.
- Ice machines and bags of ice can be used to ice your surgical site as needed. This may be done 4-5 times a day for 20 minutes at a time.

## Wound Care:

- Keep incision clean and dry. Your sutures will be hidden under the skin you will not need them removed after surgery.
- You can remove your dressing in two (2) days. Remove the old bandage and you will see old blood and butterfly (steri) strips. Leave the strips in place initially and they should come off on their own over the next 2 weeks. You can remove the steri-strips after 2 weeks. You can place another gauze pad over the incision after you shower if there is drainage.

- You may shower after you remove your dressing (2 days), but no tub bathing or soaking (swimming, hot tubs). When showering, let the water and soap run over your incision, do not scrub your incision directly.
- DO NOT PUT any alcohol, lotions, or any other medications on your sutures.

**Slings/Braces and Home Exercises (Should be done 4-5 times a day)**

SEE PATIENT HANDOUT FOR DETAILED INSTRUCTIONS!

- After two (2) days, you may stop wearing your sling/brace or only wear it as needed. It is okay to remove your sling for PT, home exercises, and bathing. To bathe under your surgical arm, lean forward from your waist to allow your arm to fall forward to wash under your arm. Do not lean to the side. You can put a washcloth under your arm for comfort if you choose.
- Please remove your sling and start at waist level activities for daily living, continue passive range of motion forward flexion to 120 degrees and external rotation to 20 degrees 4-5 times a day.
- All Patients should:** Take your arm out of your sling to move your elbow and wrist, but not your shoulder. Move your elbow up and down, move your wrist in a circular motion and make a fist 10-15 times each hour to help reduce swelling and prevent stiffness in your hand and elbow.

**\*\*RESTRICTIONS: NO PUSHING, PULLING, REACHING OR LIFTING with your operative arm.\*\***

**Follow-up Appointment:** You will have a follow-up appointment approximately two weeks after your surgery. During this visit, further questions you have regarding the actual surgery performed or your postoperative care will be answered.

**Driving:** Legally we cannot recommend that you drive while wearing a sling. It is considered driving while impaired, and can be a legal issue if you are involved in an accident since you do not have full function of your limb. You should also not drive while taking any narcotic medicine (Vicodin, Percocet, Norco, etc).

**When to call the Doctor:**

- If you have a fever above 101.5 \* Excessive Bleeding (example: you have to change the dressing numerous times) \* Foul odor or drainage from your incision, excessive redness, excruciating pain.  
\* Excessive pain not relieved by medication or rest
- Call Dr. Sabesan's office at (561) 967-4400. On evenings, nights, and weekends the answering service will contact the provider on call or if you are concerned you may also go to your local emergency room.