

Patient Education

Bone and Joint Center



Shoulder and Elbow Surgery

Understanding your treatment plan

This handout explains care after your shoulder and elbow surgery while you are in the hospital, and also details care issues while you recover at home. It covers follow-up exams, medication refills, and when to call your doctor or nurse.

While You Are in the Hospital

- Unless you receive a nerve block, pain is generally controlled with a patient-controlled analgesia (PCA) device the day of and night following surgery. This device is hooked up through an intravenous (IV) line and allows you to manage your own pain by pushing a button.
- Most times, you will be switched to oral pain medications on the day after surgery to allow for longer acting pain control and to prepare you to manage your pain after you leave the hospital.
- A physical therapist will guide you through exercises prescribed for you by the shoulder and elbow team. These exercises are vital for your recovery. We will make sure that you understand how to do them and are comfortable doing them before discharge.
- Our nursing staff will assist you in walking and moving around after your surgery. The nurses will also show you how to shower and take care of your incision.
- Once your pain is under control with oral medicines and you are able to do your physical therapy exercises, we will decide when you can be discharged from the hospital.

Follow-up Visits

- Generally, your first follow-up visit will be 2 weeks after your surgery. We will do an exam, check your incision, and assess your physical therapy progress.
- Any remaining sutures or staples will be removed, and will be replaced with steri-strips. Once the steri-strips are placed, wait 24 hours before taking a shower. The steri-strips can be removed after a week if they have not fallen off on their own before then.

- Unless we let you know otherwise, the next follow-up visit is generally at about 6 weeks after your surgery. If you have met your physical therapy goals, we will likely add flexibility and possibly some strengthening exercises to your program.
- The third follow-up visit is about 3 months after surgery. We will assess your shoulder and elbow function to decide if you would benefit from additional exercises.

Home Care

Call us right away if you:

- Have a fever higher than 100°F, or feel very sick.
- Notice any warmth, redness, and/or increased drainage coming from your incision.

Incision Care:

- You may see a small amount of drainage from your incision. This is normal and should decrease daily until completely dry.
- You should keep the incision covered with a clean, dry, and sterile dressing until your 2-week follow-up visit. **DO NOT SOAK YOUR INCISION SITE.** If there is drainage, change your dressing daily.
- You may shower, but will need to cover your incision site to keep it dry. Make sure that your incision is dry after your shower. It is important that you keep your incision site as dry as possible until your follow up appointment.
- Allow your armpit area a chance to air out a little. If you are keeping your arm at your side a lot, place a dry hand towel in your armpit to help prevent a yeast infection.

Medicines:

- We will discharge you with enough medicines to last until your first follow-up visit. At that time, we will only refill your pain medicines if you still need them.
- We expect you will no longer need your pain medication 4 weeks after your surgery. If you are still on pain medicine 4 weeks after surgery, follow-up with your primary care provider.
- See your primary care provider after your surgery for a follow-up visit if you have any other medical issues.

- DO NOT take any NSAIDS (anti-inflammatory medications) such as ibuprofen, aspirin, and/or Celebrex for 6 weeks after your surgery. These drugs slow bone growth and this may lead to poor healing. If you were taking aspirin before your surgery for cardiac reasons, it is OK to resume this.
- Unless you are already taking a medication that has Tylenol (acetaminophen) in it, such as Vicodin or Percocet, you may take Tylenol. Do not take more than 4,000 mg of Tylenol in a 24-hour period. If you have liver problems, consult your doctor before using Tylenol or products with Tylenol in it.
- The goal is to be off of all pain medicines by 3 months after your surgery.

Activity

Lifting:

- **Do not** lift anything heavier than a coffee cup until at least your 6-week follow-up visit.

Driving:

- **Do not** drive or operate heavy machinery while taking any narcotic pain medicines.
- Unless we say otherwise, **do not** drive any vehicle for at least the first 6 weeks after your surgery. Remember that your shoulder is still healing and is in a weakened state. If you need to react to a dangerous driving situation, you may stress and possibly tear off one of your muscles from your new shoulder repair and/or lose control of your vehicle.

Walking:

- Get up and move around. It is good for your general health.
- If you go out in public, you may want to use a shoulder sling so that people will avoid bumping into your shoulder. At home, remove your sling when it is not needed.

Showers:

- Twenty-four hours after your 2-week follow-up visit, you may take normal showers and baths.

Questions?

Call 206-598-4288

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help at any time.

Bone and Joint Center
Monday through Friday,
8 a.m. to 5 p.m.
206-598-4288

After 5 p.m. and on
weekends and holidays:
Call the Emergency
Department at
206-598-4000
or call the operator at
206-598-6190 and ask
to page the orthopaedic
resident on call.

Smoking:

- Stop smoking before, during, and at least 3 months after your surgery. Smoking slows bone and tissue healing.
- If we didn't tell you during one of your visits or your stay in the hospital – smoking not only interferes with your recovery after surgery, but is also very bad for your overall health. This would be a good time to stop smoking. Talk to your doctor or nurse about resources to help you quit smoking.

Physical Therapy

- Physical therapy is a vital part of your shoulder and elbow repair. Do your physical therapy exercises as prescribed to avoid stiffness and to make the most of your surgical repair. Do your exercises at least 5 times a day each day.
- You are prescribed physical therapy goals and limits based on your specific needs prior to discharge from the hospital. If you misplace your goal sheet or have any questions, please contact us as soon as possible.

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