MATTHEW J. DUBIEL M.D.

Shoulder and Elbow Surgery www.mdubielmd.com

Shoulder Arthroscopy

DIET

- Begin with clear liquids and light foods (jello, soups, etc.)
- Progress to your normal diet if you are not nauseated

WOUND CARE

• Maintain your operative dressing, loosen bandage if swelling of the elbow, wrist, or hand occurs

 \bullet It is normal for the shoulder to bleed and swell following surgery – if blood soaks through the bandage, do not become alarmed – reinforce with additional dressing

- Remove surgical dressing on the second post-operative day
- If steri-strips presents, they are to remain in place until first post op visit
- You can shower two days after surgery. NO immersion of operative arm (i.e., Bath)
- If minimal drainage is present, apply band-aids over incisions and change daily.

To avoid infection, keep surgical incisions clean and dry

MEDICATIONS

• If you received a block your arm should feel numb anywhere between 12 and 36 hours before it wears off. If you did not receive a block, you may have had numbing medication injected near your wound and this should wear off between 12 and 24 hours

• Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle

Primary Medication = Oxycodone

- Take 1 2 tablets every 4 6 hours as needed Max of 12 pills per day
- Plan to use it for 2 to 5 days, depending on level of pain

• Common side effects of the pain medication are nausea, drowsiness, and constipation – to decrease the side effects, **take medication with food**.

- If constipation occurs, consider taking an over-the-counter laxative
- If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed
- Do not drive a car or operate machinery while taking the narcotic medication

• Ibuprofen 400-600mg (i.e., Advil) and acetaminophen (Tylenol) may be taken in between the narcotic pain medication to help smooth out the post-operative 'peaks and valleys'. Alternating ibuprofen and acetaminophen with each other allows you to maximize your pain control and minimize the need for the narcotic pain medication.

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<u>ACTIVITY</u>

• When sleeping or resting, inclined positions (i.e., reclining chair) and a pillow under the forearm for support may provide better comfort

• Do not engage in activities which increase pain/swelling (lifting or any repetitive above shoulder level activities) over the first 7-10 days following surgery

- Avoid long periods of sitting (without arm supported) or long distance traveling for 2 weeks
- NO driving until instructed otherwise by physician
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable

*May apply ice pack up to 20 minutes every hour for the first 72 hours to help reduce swelling. Do not place ice pack directly on skin

IMMOBILIZER

• Your immobilizer should be worn at all times except for hygiene and exercise

Emergencies

• Contact Dr. Dubiel or his team at 231-935-5880 if any of the following are present:

- Painful swelling or numbness
- Unrelenting pain
- Fever (over 101° it is normal to have a low-grade fever for the first day or two following surgery) or chills
- Redness around incisions
- Color change in wrist, hand, or lower extremity
- Continuous drainage or bleeding from incision (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting

• If you are experiencing an urgent need that cannot wait until normal business hours, call 231-935-5000 to be connected with the Munson Switchboard and ask for the Munson Orthopedic Institute on-call physician to be paged

• If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

• If you do not already have a postoperative appointment scheduled, please contact the scheduling office during normal office hours 231-935-5880