

**Dr. Friedman's Post-Operative Instructions:**  
***Shoulder Replacement***

**Immediate Post-Operative**

- You should wear your sling and shoulder pillow at **ALL** times. You should do exercises to move your **ELBOW, WRIST, and FINGERS** at least 3 times per day starting immediately after surgery, but avoid any motion of your shoulder.
- Use ice packs on the surgical site 20 minutes per hour while awake to decrease swelling and diminish pain.
- It can be helpful to sleep with a pillow under the arm that had surgery for comfort

**Post-Operative Day 3 (3<sup>rd</sup> day after surgery)**

- You may sponge bathe.
- Carefully remove your sling without moving the shoulder.
- You may lift the arm enough to clean your armpit.
- Do not get surgical dressings wet

**Post-operative Days 10-14**

- Continue as above.
- You will have your 1<sup>st</sup> post-operative visit during this time period.
- At that visit, we will change your dressings, inspect your wounds and remove any sutures (stitches) in your shoulder.
- You will be given your 1<sup>st</sup> post-operative prescription to start Physical Therapy.
- We will review your X-rays to show you what was done at your surgery.
- You may shower after day 14. Wounds may get wet but may not soak.

## When to call the Office

If you do not already have a post-operative follow-up appointment, please call the appointment desk at (209) 946-7200 in the first day or two after surgery to schedule a post-operative visit with Dr. Friedman. Your appointment should be **10-14 days after surgery**.

### **Please call if any of the following are present:**

- Unrelenting pain
- Fever or chills, fever of  $>101.5$
- Excessive nausea/vomiting due to pain medication
- Continuous drainage or bleeding from the dressings
- Increasing swelling or persistent numbness or tingling in the hand/fingers
- Color change in the fingers. Your fingers should be pink and warm.
- Extreme pain on the back of the calf, shortness of breath, or chest pain which may be warning signs of a blood clot or pulmonary embolus. If symptoms are severe, dial 9-1-1
- ANY other worrisome condition
- Please do not hesitate to contact us with ANY questions that arise at (209) 946-7213.

**POST-OPERATIVE EXERCISES: START POST-OPERATIVE DAY 1 or 2:**

1. Actively move your fingers, wrist, and elbow.
2. Ball Squeezes: Begin this exercise by making a tight fist or by gripping a rubber ball. Hold this position for 10 seconds and then release. Repeat this exercise 20-30 times, three times a day. This exercise works your hand and helps prevent blood clots.
3. Elbow range of motion: Before starting this exercise, remove your sling. With the arm hanging at your side, slowly bend and straighten your elbow as far as tolerated using the other hand to assist. This exercise will help avoid stiffness in your elbow wearing a sling for long periods of time.

## General Medication Instructions After Surgery

You will receive multiple prescriptions before or at the time of surgery, typically including:

1. Narcotic (i.e. Norco). A narcotic is a strong pain medication that blocks the sensation of pain. Once your pain decreases, discontinue the use of this medication as it can be addictive. This medication typically helps with pain, but also causes drowsiness, constipation, nausea, and itching. Avoid combining this medication with Tylenol. Drink plenty of water to help decrease the risk of constipation.
2. Non-steroidal Anti-inflammatory Drug/NSAID (i.e. Meloxicam, Naproxen). This decreases the inflammation and swelling after surgery. This will help with mild pain associated with surgery and also to help with inflammation and swelling. Use this medication as directed. Take with food. Speak with your doctor if you have a history of heartburn, ulcers, or heart issues.
3. Stool softener (i.e. Colace). A stool softener is often necessary while taking narcotic medication to help with constipation. Use this medication while taking the prescribed narcotic medication.
4. Anti-nausea medication (i.e. Zofran, compazine). Anesthesia and narcotics can cause significant nausea in the first 24-48 hours after surgery. Take the anti-nausea medication as needed to help with these symptoms.

5. Aspirin. Take aspirin as directed to help prevent blood clots.
6. Gabapentin. This is another medication that helps to reduce pain after surgery. Take three times a day for 5 days, two times a day for 2 days, and once a day for 2 days. This medication may cause drowsiness.

## **RECOMMENDATIONS FOR PAIN CONTROL AFTER SURGERY**

Many patients will receive a nerve block to help with pain control during and immediately after surgery. This temporarily causes numbness and difficulty moving the affected limb. There will be some pain after the nerve block wears off. Pain is typically worst the first few days following surgery.

Starting after surgery and **BEFORE** your nerve block wears off, follow the following pain medicine regimen for the first 24-48 hours after surgery:

One or two narcotic (pain) pills approximately every 4 hours. The day after surgery, some patients may need to take 2 pills every 4 hours for pain relief. If taking 2 pills every 4 hours initially, you should be able to decrease the dose to 1 pill every 4 hours after 48 hours or so. Begin spreading out the time interval between narcotic doses as tolerated. Many patients are completely off their narcotics by the first post-operative visit.

**WEAN** off the narcotics, ie, take one pain pill every 6 hours, then 8 hours, then 12 hours, then discontinue.

Use plenty of ice to help reduce inflammation and pain. Do not use ice for more than 20 minutes at a time to prevent frostbite.

