Robert E. Berry DO

ORTHOPEDIC SURGERY & SPORTS MEDICINE
S.P.O.R.T | SPORTS PHYSICIANS, ORTHOPEDICS, AND REHABILITATION OF TEXAS



PATIENT POST-OPERATIVE INSTRUCTIONS

Shoulder Arthroscopy

1. DRESSINGS AND STERI-STRIPS

- The dressings on your shoulder should be left in place and kept dry for <u>3-5</u> days.
 - O Your dressings will be removed/changed at your first postoperative appointment in clinic or at physical therapy.
- Your steri-strips will be changed at your first postoperative visit
- Do <u>NOT</u> submerge the shoulder (ie. hot tub / bath, etc) for the first 2 weeks after surgery.

2. ACTIVITY/SLING

- Activity allowed in the immediate postoperative period will be specified by Dr. Berry based on your specific procedure.
- Keep the shoulder immobilized in the sling at all times during except when in your CPM machine or until you are told to stop using it by Dr. Berry.
 - o This means you will sleep in it as well to help prevent re-injury to your shoulder.
- When instructed by Dr. Berry you may shower without the sling, BUT must ensure the shoulder is protected and you are extremely cautious.
 - o MOST ACCIDENTS HAPPEN IN THE BATHROOM!

3. CPM MACHINE

- Use the CPM machine for a minimum of 6-8 hours a day to prevent scar tissue and improve range of motion.
 - o You will be contacted either before surgery or within 2 days after surgery to schedule a delivery time for the machine
- You will use the CPM machine for 21 days after surgery.
 - o You may use your cold therapy device in conjunction with the use of the CPM machine.

• For SLAP Repair/Scope/MUA:

o Start the CPM at 20-50 degrees or as tolerated, and increase up to 140 degrees as tolerated with a minimum of 10 degrees daily.

For Rotator Cuff Repair:

o Start the CPM at 30-50 degrees or as tolerated, and increase at a minimum of 10 degrees daily up to a maximum of 90 degrees.

4. PHYSICAL THERAPY

- If you just had a basic shoulder scope you will begin physical therapy within 1-2 days after surgery.
- If you have a repair done you will typically start therapy 2-4 weeks after surgery and will be given further instructions at your postoperative visit.

S.P.O.R.T | Sports Physicians, Orthopedics, and Rehabilitation of Texas

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• It is very important to follow Dr. Berry's protocols for physical therapy as it could affect the outcome of your recovery.

5. PAIN

- Your anesthesiologist will discuss with you in regards to a block which is an injection that will help with pain control and can last up to 36 hours.
 - o We highly recommend getting the block to facilitate pain control and initiation of recovery.
- You have been provided with a prescription for several different medications that when used together will provide the most effective relief after your surgery.
 - Read each bottle carefully and <u>follow instructions</u>
- Once you no longer require narcotics for pain control, switch to Extra-Strength Tylenol as required, but <u>do not</u> take Tylenol with the narcotic.
- Use an ice pack or cold therapy delivery system for <u>20 mins every hour</u> while awake to help with pain and swelling.

6. BLEEDING AND SWELLING

- It is common to have some spotting through the dressings following surgery. Place an additional dressing over the area if this occurs.
- The incisions may continue to "leak" fluid after removal of the initial dressing this is common and should <u>not</u> raise concern. Place an additional bandage or Band-Aids over the incisions to help them heal. Keep the incisions <u>clean and dry</u>.

7. DIET

- Resume your regular diet following surgery drink plenty of fluids!
- Add additional fiber to your diet to help relieve the constipation associated with the pain medication.
- If you have diabetes, it is very important to maintain normal glucose levels after your surgery.

8. RED FLAGS

- If you develop any of the following symptoms contact the office or go to your nearest emergency department for assessment:
 - Increasing calf pain / swelling that does not improve with elevation and ice
 - Shortness of breath
 - Chest pain
 - Redness and purulent drainage around the incision

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9. POST-OPERATIVE VISITYour first post-operative visit is so	scheduled for:	_

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