

## POST SHOULDER ARTHROSCOPY DISCHARGE INSTRUCTIONS

Client: \_\_\_\_\_  
DOB (yyyy/mmm/dd): \_\_\_\_\_  
HRN / MHSC: \_\_\_\_\_  
PHIN #: \_\_\_\_\_  
Addressograph/Place Label Here

### Wound Care:

Your skin incisions will be closed with dissolvable stitches under the skin and held together with strips of sterile tape (small white strips of tape). You will have a water resistant dressing covering these tapes. The incision wounds may leak blood-tinged or straw-coloured fluid for up to a week. If the dressing gets wet from this, you may change it.

After **2 to 3 days** you may remove the dressing, but **DO NOT** remove the tape from your incisions. The tape must stay on so the incisions heal well. Please keep the tape on until your next appointment with your surgeon. If the tape falls off, do not worry. It is normal for the incisions to appear pink or slightly red. There are no stitches that need to be removed.

You may gently shower once the dressing is removed. It may be best to take a bath and sponge around the area and armpit. Pat the sterile strips of tape as dry as possible to prevent it from coming off. Please **DO NOT** immerse your incisions under water until your follow-up appointment with your surgeon.

### Shoulder Sling:

Please keep your hand elevated above the level of your heart as much as possible for the first 5 days after surgery. This will minimize swelling in your hand. It is often helpful to rest your hand on a pillow when sitting or lying down. This can safely be done while wearing the sling.

You have a sling in place and the following instructions pertain to you:

- Arthroscopy and Acromioplasty/Distal Clavicle Excision** – A sling may be necessary for 1 to 3 days, but only for comfort. You may progress through the Early Postoperative Shoulder Exercises.
- Arthroscopy and Anterior Stabilization/Rotator Cuff Repair** – You will wear the sling until your first appointment with your surgeon after the surgery (about 2 to 4 weeks). You may be required to wear your sling for up to **6 weeks after surgery**. The sling may be removed for your exercises as directed, or if you are relaxing with your arm supported. You may progress through the Early Postoperative Shoulder Exercises.

### Pain Control:

Local anaesthetic (freezing) may have been used during your operation. This will wear off within 12 to 30 hours. It is common for the freezing to wear off slowly and some patients have a small amount of numbness in the arm for days after surgery.

After shoulder surgery you may experience significant pain once the freezing starts to wear off. Pain medications are necessary for most patients. A prescription for pain relieving medication will be provided prior to your discharge from hospital. If you do not have a prescription consult your local pharmacist for any over the counter pain medications. It is best to start taking pain medication well before the freezing wears off.

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**Ice:**

You may use ice packs or ice bags for pain relief and to help reduce swelling. Please ice your shoulder several times per day for the first week for only 20 minutes at a time. There must be a cloth layer between your skin and the ice (shirt, towel, etc.). Some patients rent a cooling unit. Please refer to the specific guidelines for that unit.

**Bleeding:**

The shoulder is usually very swollen as sterile water is used in the shoulder during surgery. This water may leak out of the incisions for several days. It is also common for an incision to bleed several hours after surgery. A small amount of blood on your dressing is normal. If this occurs, use your other hand to apply firm pressure to the dressing/shoulder for 10 minutes (without stopping) and the bleeding should stop.

It is also normal to have bruising, swelling and slight redness of the skin, which can extend down the arm and into the hand. This may become noticeable several days after surgery and it may last for weeks.

**Physiotherapy:**

You will start the Early Postoperative Shoulder Exercises to do on your own until you see your surgeon. Please **DO NOT** attempt to raise your arm using your shoulder muscles until instructed to do so by a physiotherapist. If you need to move the arm you can use your good arm to help move your surgical arm. If physiotherapy is required, you will get a referral to a physiotherapist from the surgeon after your surgery (either in the recovery room OR **at your first appointment after surgery**). Most patients take 2 to 4 months off work to recover from the operation. Your return to work depends on the type of work you do. Your physiotherapist can help guide your return to work plan.

**Sleeping:**

Sometimes it is most comfortable to sleep in an upright position such as a recliner or propped up by pillows in bed. In addition, putting a smaller pillow under the arm for support may offer some comfort.

**Driving:**

Driving a motor vehicle is **NOT** allowed while wearing a sling. You must avoid driving until your arm is strong enough to react quickly and safely.

**If you have not already made a follow up appointment with Dr. Klippenstein please make this appointment in 3 weeks at the Brandon Clinic, Station 9 at 204-571-7136. If you have had surgery in Minnedosa you may receive other follow up instructions.**

Reviewed with: \_\_\_\_\_

Signature \_\_\_\_\_

Date: \_\_\_\_\_

Nurse Signature \_\_\_\_\_

If you have any questions or concerns after you arrive home, contact your doctor or contact Health Link (1-888-315-9257). If you believe your concern is **urgent**, come to the hospital Emergency Department.

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### EARLY POSTOPERATIVE SHOULDER EXERCISES

#### Directions:

- These exercises should be started the day after your surgery.
- You will do each exercise 3 times a day (3 sessions: morning, noon, evening).
- Each exercise should be done 10 to 20 times (repetitions) for each session.

#### Shoulder Pendulums:

- Stand and bend at the waist, holding onto a table or chair with the good arm, leaving the surgical arm hanging.
- Start the movement by gently moving your body side to side to create a circular motion with your surgical arm. The circles should be no bigger than a dinner plate.
- DO NOT USE YOUR SHOULDER MUSCLES. YOUR SHOULDER SHOULD BE RELAXED. LET YOUR BODY DO THE WORK.



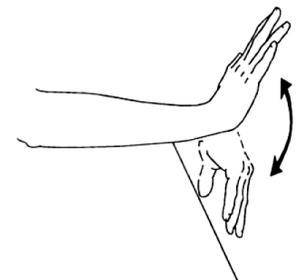
#### Forearm Supination/Pronation:

- Sit up straight in a chair with your forearm supported on a table.
- With your elbow slightly bent, turn your palm up to face the ceiling, then down to face the table turning only the forearm in a slow controlled motion.



#### Active Wrist Extension/Flexion:

- Begin with the forearm of your surgical arm on the table with your palm down and wrist over the edge.
- Lift your hand up towards the ceiling and then bring it down towards the floor.
- Do it in a slow and controlled motion.



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### **Active Elbow Flexion/Extension:**

- Sit on a chair with your arm straight along your side.
- Bend your elbow upward bringing your hand to your shoulder.
- Lower your hand slowly until your arm is straight.



### **Active Finger Flexion/Extension:**

- Sit in a chair with your surgical arm on your lap or on the armrest.
- Make a fist with your fingers and then spread your fingers out wide.

