

Paul Rothenberg MD
Sports Medicine and Shoulder Surgery
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Shoulder Surgery Post-Surgical Instructions

First 24-48 Hours:

- Rest and Relax
- You may have minimal pain for the first 12-24 hours, afterwards you may experience an increase in pain, this is normal, the nerve block that was provided preoperatively typically wears off at this time. Take your first dose of pain medication when you begin to feel “pins and needles.” This is an early indication the anesthetic is wearing off.
- Arthroscopic fluid is used to inflate your shoulder during surgery. You may experience a lot of clear or pink drainage from the wound during the first 24 hours.

Activity and Wound Care:

- Take it easy for the first 72 hours after surgery. No strenuous activity.
- Ice packs can be applied to the dressing for 20 minute periods at a time, with 20 minutes ice free intervals. This can be done as needed for pain control and is most useful for the first 72 hours
- Do not remove the post surgical dressing for 72 hours.
- After 72 hours dressings can be removed to shower. (No Baths)
- The wound CAN get wet, but do not scrub it.
- After shower, gently dry surgical sites and apply regular sized band aids for smaller incisions. If incisions are larger (Shoulder replacement, clavicle fracture, coracoid transfer), you will need to purchase larger band aids at the pharmacy.
- Sutures will be removed in the office in 10-14 days
- If you notice significant redness or drainage please call the office (201-975-2323)
- Sleep – consider sleeping in an upright position the first 72 hours. Sleeping flat in bed may be uncomfortable. Be sure to use your sling at night

Medications:

- A number of medications will be prescribed to you. Please take with food and water.
- Please take the medication as prescribed on the bottle. Below is a description of each medication.
- The medications we typically use are as follows:
 - Percocet (Oxycodone/Acetaminophen)
 - Strongest pain medication, to be taken every 4-6 hours as needed for pain
 - Tramadol
 - Weaker pain medication than Percocet. Use this when you no longer have Percocet, or if the Percocet makes you feel drowsy/nauseous, or if your pain is not severe
 - Zofran (Ondansetron)
 - Nausea medication, to be taken as needed for Nausea/Vomiting
 - Colace
 - Medication for constipation. Anesthesia and pain medication can lead to constipation.

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- For patients with Shoulder replacements, or larger open procedures we typically add the following medications
 - Cefadroxil
 - Antibiotic for post surgical prophylaxis.
 - Aspirin 81 mg
 - Blood clot prophylaxis
 - Please note: Narcotics are a strong medication with potential side effects that include; addiction, constipation, over-dose, nausea and additional issues not listed here. Very important to only take as prescribed.
- Note – should you experience stomach problems or if your body is not tolerating any of the medications above, STOP the medications. You may discontinue the above medications as you see fit and take “Tylenol”***

Sling Use:

- Length of use of the sling is typically 4 weeks. If Sling is to be worn for a longer duration, this will be communicated directly to you.
- Sling can be removed for bathing, or when sitting (ie watching television)
- When sling is removed, please keep elbow supported by pillows and allow it to rest.
- Do not lift anything over weight of coffee cup.
- Regular bending and straightening of elbow is allowed to prevent stiffness.
- Squeeze ball. You may be given a squeeze ball attached to your sling. Use it 2-3 times per day. Squeeze 20 times per sessions. Purpose: to avoid stiffness and swelling in hand/forearm.
- How to re-apply sling – Consider taking pictures of the sling prior to removing it. This will allow you to re-apply the sling in the same position.

Physical Therapy:

- In your discharge papers, you will be given a prescription for physical therapy.
- If there is no PT prescription, in your folder, then you will be given one at your first postop appointment.
- Contact our office to locate physical therapy facilities around the area of your choice.
- Physical therapy typically begins 2 weeks after surgery. If therapy is to be started sooner than 2 weeks, this will be communicated directly to you.

Return to Work or School:

- You may return to work (sedentary) typically 1 week after surgery if pain is tolerable.
- Returning to labor depends on the specifics of the surgery and this will be communicated directly to you.

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Normal Sensations and Findings after Surgery:

- Nerve block – will stay in effect 8-24 hours from the time of surgery. This may cause numbness and inability to use the extremity including fingers until the block wears off.
- Persistent numbness at hand – usually resolves 2-3 days after surgery.
- An increase or surge in the amount of pain after the block wears off. See Pain Medications instructions above.
- Shoulder pain and swelling can last up to 6 weeks.
- Small amount of bloody drainage first 3-4 days.
- Swelling at the hand. Using the squeeze ball can help alleviate this.
- Low grade temperature under 101.5 degrees. If this occurs, a) drink plenty of fluids, b) cough, c) take 10 deep, slow breaths and hold for a second and cough forcefully afterwards.
- Redness at incision sites for several days.

NOTIFY OFFICE IMMEDIATELY IF ANY OF THE FOLLOWING SIGNS OR SYMPTOMS OCCUR:

- Change in incision (increased redness, drainage, incision opens up, suture comes out, foul smell, yellow discharge).
- Sharp pains at shoulder.
- Temperature over 101.5 degrees.
- Fevers, chills, nausea, vomiting, diarrhea.
- Pain not relieved by pain medications.

Post-Surgical Appointments:

Typically 10-14 days after surgery. The date and time is in your post op folder. If you do not see an appointment in your folder. Please call my surgical scheduler at 201-975-2323 ext. 12696