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Total Shoulder Replacement Post-operative instructions

Post-operative Day 1/2

- Do not put any creams or antibiotic agents on the wound.
- A therapist will evaluate you and start moving your operative extremity.
- You can come out of the sling twice daily to move your ELBOW, WRIST, and FINGERS.
- You may shower on POD#2 if the wound is dry. Gently soap and water the area. Pat the incision dry after showering and reapply bandage.
- If your pain is controlled, you may be discharged to home.

Precautions:

- Keep your elbow in front of your body at all times, do not reach behind your body.
- When putting on clothing, lean forward to dangle your operative arm and pull a shirt over the operative arm first. Then put the other arm in the sleeve. To remove clothing, start with the unoperated arm first.
- You should wear the sling at all times when in public and when sleeping.
- Constipation can occur with pain medication. Take an over-the-counter laxative such as colace or senna as needed. Try to decrease pain medications as tolerated.
- If you develop a fever (101.5), redness or drainage from the surgical incision site, please call our office to arrange for evaluation.

Post-operative Day 3-14

- **Begin anticoagulation regimen:** Aspirin 325 mg once per day x 4 weeks. If you have any difficulty using blood thinners or have bleeding in your bowel movements, please alert us.
- Outpatient physical therapy will begin during this time.
- Apply ice or cryocuff to your shoulder as tolerated to reduce pain and swelling.
- An appointment for your 1st post-op visit will occur at 10-14 days after surgery for suture or staple removal
- Continue to wear the sling whenever in public or for sleeping but can come out of it while sitting comfortably in your home.
- Move the elbow, wrist and fingers liberally to decrease gravity-dependent swelling.

Post-operative Weeks 1-6 (2nd Post-operative visit between 4-6 weeks post-op)

- Continue advancing range of motion in safe, steady fashion.
- Do not focus or worry about strengthening during this phase at all.
- You can discontinue use of the sling between 4-6 weeks post-op.

FREQUENTLY ASKED QUESTIONS (FAQ)

How much pain will I have?

This is variable of course but we provide you with an appropriate amount of narcotic pills to keep you comfortable until your 1st post-operative visit. Remember, that most of our patients have regional anesthesia and it is not unusual to have numbness and tingling that can be present for several days following your surgery.

When should I call the office with concerns?

Any signs of infection should be reported immediately – these include increased drainage (usually thick, cloudy, not liquid secondary to the arthroscopy), redness, increased warmth, and fevers ($T > 101.8$).

When can I remove the sling?

You can take the sling off for showering and to do your elbow, wrist and finger exercises on post op day 1. However, you must wear your sling in public and at night for sleeping for the 1st 4-6 weeks.

When can I begin driving?

Typically, you will be able to resume driving when your sling comes off ~4-6 weeks. While many people do drive earlier than this, keep in mind that it is against the law to drive while in a sling.

When can I return to work?

This really depends on the individual patient specifically with respect to job demands (labor vs desk job). Some patients return to work as soon as 4-7 days post-operatively and others require extensive time away from work if “limited duty” is not available.

How long will I have Physical Therapy after the surgery?

The typical therapy program will be a minimum of 3 months. The 1st phase of therapy will be designed to safely regain your range of motion while the 2nd phase of therapy will be directed at regaining function, strength, and endurance.

Will the alarms go off at the airport?

Generally, no, but actually, it is dependent on the specific machine and how sensitive it is set.

If you have any questions, please call our office at (832) 698-0111.