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Hammond, LA 70403
Day phone: (985) 230 – 2663
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Postoperative Instructions for Shoulder Arthroscopy:

- 1) Distal clavicle excision**
- 2) Subacromial decompression**
- 3) Bursectomy**
- 4) Rotator cuff debridement**

Important Phone Numbers:

- Please see the contact information above for important phone numbers to call.
- If you have concerns after hours, please call the “After hours number” to reach our on-call services.

Physician Followup:

- Appointments for post surgery followup can be made one of two ways.
 - o Either call the day phone number above to make an appointment with the doctor yourself.
 - o The nursing staff at our facility can make the appointment for you
 - o The time to your first followup will be confirmed prior to leaving for the day.
 - o Follow up with Dr. Witty is about 1 week after surgery.

Precautions/Weightbearing:

- During the initial postoperative period, avoid placing any weight through your shoulder or hand.
- The sling should remain on AT ALL TIMES, including sleeping with the exception of showers and when you start therapy to the shoulder.

Sling:

- The hand should be facing forward and the upper arm should be in line with the body when looking from the side.



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Example of incorrect positioning of the shoulder sling. The upper arm is behind the torso/upper body.



How to Apply Your Shoulder Sling:

Note: Please see drjeffreywitty.com and go to “Patient Info and Education >> Patient Education Videos” and watch “How to Apply Shoulder Sling” for details on how to apply your sling by yourself without need for a second person.

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Step 1:

Place sling and pillow on surface at least at hip height and stand next to it. The sling should be open so you can lower the forearm into the support.



Step 2:

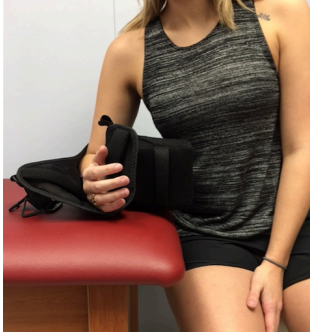
Lean over toward the sling while supporting injured arm with the opposite arm.



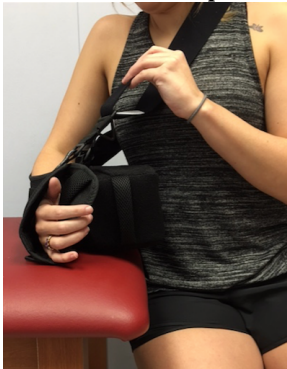
Step 3:

Lower the arm into the sling.

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Step 4:
Secure the strap for the forearm support and the strap around the neck.



Step 5:
Reach around back and grab the strap to secure pillow and pass it around to the front.



Step 6:
Clip the final strap to the appropriate location on your individual sling.

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Nerve Block Information:

- The anesthesia team may have placed a nerve block prior to surgery
- A nerve block is a procedure where numbing medication is injected around the nerves that travel to your shoulder.
- It should provide 8 – 12 hours of pain relief. During that time, the shoulder may feel numb and you may even be unable to move the extremity.
- Start taking your pain medication immediately when you start to feel any pain even if it is minimal.
- Monitor your skin closely and place a towel between the skin and any ice pack to avoid frost bite. This is important when the block is working because you will not be able to feel anything.

Recovery at Home:

- 1) If you are discharged the day of surgery, the first meal at home should be clear liquids. Slowly increase to other easily tolerated meals (ex. Soup) to prevent any nausea. Taking your pain medication with some food may help.
- 2) After shoulder surgery, it is common for patients to feel more comfortable sitting up or in a recliner for at least a few weeks after surgery. You may feel more comfortable sleeping in a recliner or similar position until that time.
- 3) If you have received a nerve block (see Nerve Block section), it will often begin to wear off later in the evening. Take the pain medication right when you begin to feel even the slightest amount of pain in order to “get ahead” of the pain. Apply ice to help with pain (see section on ice packs below).

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- 4) You may start to move your shoulder, hand and wrist while in the sling. See exercise section below and any additional handout that may have been provided.
- 5) If you begin to have worsening pain or swelling, redness, temperature greater than 100.4, or drainage from your incision, call Dr. Witty's office immediately at the number listed above.
- 6) Try to get up and move around as much as possible after surgery keeping in mind any postoperative precautions.

Ice:

- 1) Ice (cryotherapy) can be applied to the shoulder immediately after surgery to help with postoperative pain and swelling. In fact, some studies show that ice treatment is just as beneficial as pain medication. Commercial cooler type devices attached to a cuff that wraps on the shoulder are helpful, but icing can be performed using standard ice packs.
- 2) Place a small hand towel (or similar) to the shoulder and then place the pack/device on top. This will help prevent the dressing from getting wet from condensation. It will also help from the skin frostbite especially with a nerve block.
- 3) Apply an ice pack 30 minutes on the shoulder and then 30 minutes off the shoulder to help minimize pain and swelling. You can repeat this cycle as much as possible to help with pain. Because you may not be able to feel how cold the skin is getting, please remember to check the skin often while the nerve block is in effect. It is common to use the ice packs for the first few months after surgery when the shoulder gets sore, especially after therapy.

Wound Care and Dressing Change:

- 1) Typically your dressing will consist of white gauze and white tape. It may seem a little bulky on your shoulder. Leave this dressing and tape on for 2 days. During that 2-day period, reinforce the dressing if needed with more gauze and tape directly on top of the initial postop dressings. At the end of 2 days, you may remove the tape and the gauze. You may see more white gauze, and underneath that you may see yellow gauze on top of stitches. You may remove the yellow gauze. Replace clean/fresh white "4x4" gauze or

similar dressings over the incisions and re-tape. See the images below.

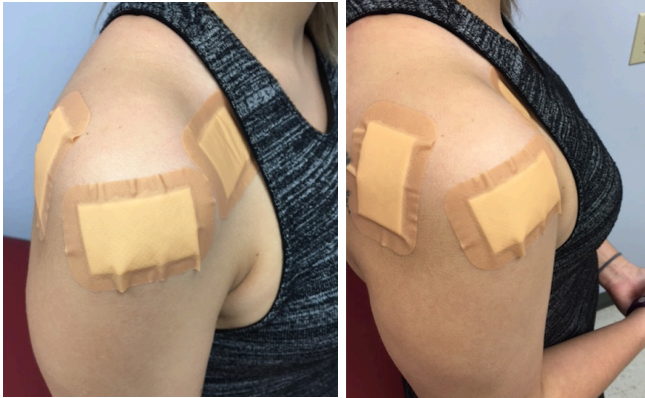


- 2) Another type of dressing used are “Steri-strips”. They are tape like adhesives. They will typically begin to peel off on their own after a week or so and then you can remove them completely. See image below.



- 3) Replace the dressing daily until the day you have no spots or drainage on the gauze. You can use either similar gauze and tape that was in place right after surgery, or you can use absorbent adhesive dressings that are sealed on all four sides. See images below.

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Shower / Bathing:

- 1) Once your incisions have no drainage, you may start taking a shower. Allow the operative arm to hang at the side and use the other arm to bathe and dry. It may be helpful to obtain a shower chair which will allow you to rest the operative arm on your thigh. See images below.

Step 1:

Start in the upright position with arm at the side.



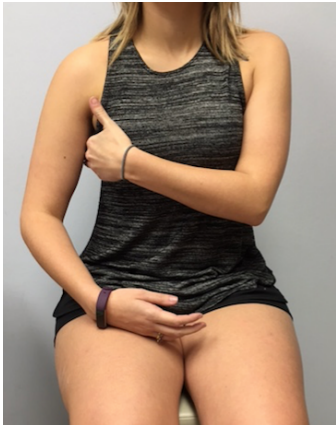
Step 2:

Lean toward the injured shoulder. This will allow access to the armpit without using the shoulder and stressing the repair.

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Note: This can also be done in a seat position. Lean toward side as needed to access underneath the arm for bathing.



- 2) Replace your sling without moving your arm away from the shoulder. You may have to lean to the side to gently allow your arm to hang away from your body to apply the sling. See instructions above or video on Dr. Witty's website.

Exercises:

- You will be allowed to start the following exercises.
- You may start them the same day after surgery if you are comfortable, but start at least by the second day.
- Videos are available on Dr. Witty's website.
- These exercises can be started immediately after surgery to facilitate recovery and work together with your protocol with the therapist.

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- Perform exercises 3 times a day for approximately 30 minutes per session. Ice shoulder after exercises and throughout day as instructed.
- **You should feel a stretch when doing the exercises, but avoid significant pain while doing them. The goal is to slowly progress with the motion day to day. You likely will not be able to get all of your motion immediately after surgery.**

Table Slides:

- Find a table or counter
- Sit down on chair so that table is approximately the level of the elbow.
- Place injured arm's hand on a small towel to help it slide along the table.
- Place opposite hand on top of the injured hand.
- Using the opposite hand, push the injured hand and arm away from your body.
- Lean forward and use opposite hand to push hand away from body.
- Once you feel a good stretch (avoid significant pain), hold the arm in that position for about 5 seconds and then return to upright and seated position.
- Perform 3 sets of 10 repetitions, 3 times per day



Passive Forward Flexion / Elevation:

- Use a broomstick, golf club, or any other similar device to assist.
- You can perform standing or by lying flat on your back on floor, bed or other surface. At first, you may be more comfortable doing exercise while on back.
- Using uninjured arm, push the injured arm overhead.
- Once you feel a good stretch, hold in position for about 5 seconds and then pull arm back to starting position. You may not be able to get arm completely overhead right away. You will need to work on this every day.
- Perform 3 sets of 10 repetitions, 3 times per day

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Passive External Rotation:

- Use a broomstick, golf club, or any other similar device to assist.
- You can perform standing or by lying flat on your back on floor, bed or other surface. At first, you may be more comfortable doing exercise while on back.
- Keep injured arm's elbow directly against body at the side.
- If you have trouble keeping elbow at the side, place a pillow between your body and elbow and squeeze pillow to body to hold it in place.
- Using uninjured arm, push the injured arm outward rotating at the shoulder.
- Once you feel a good stretch, hold in position for about 5 seconds and then pull arm back to starting position.
- Perform 3 sets of 10 repetitions, 3 times per day

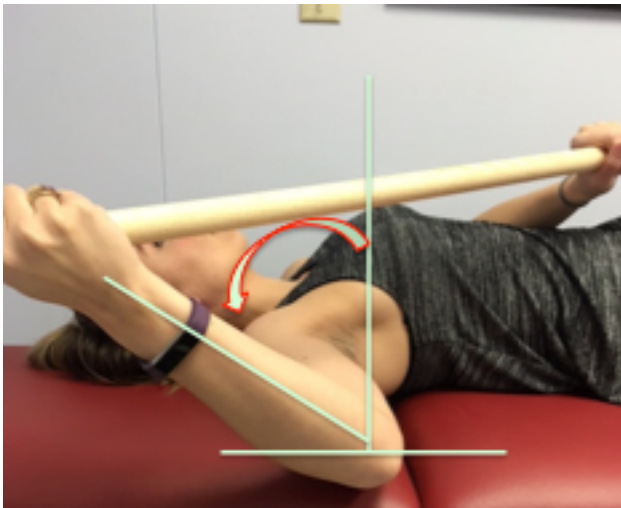
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Passive Abduction + External Rotation:

- Use a broomstick, golf club, or any other similar device to assist.
- Perform this stretch while lying flat on your back on floor, bed or other surface.
- Using uninjured arm, push the injured arm out to the side and rotate outward at the same time.
- Once you feel a good stretch, hold in position for about 5 seconds and then pull arm back to starting position. You may not be able to get arm completely overhead right away. You will need to work on this every day.
- Perform 3 sets of 10 repetitions, 3 times per day

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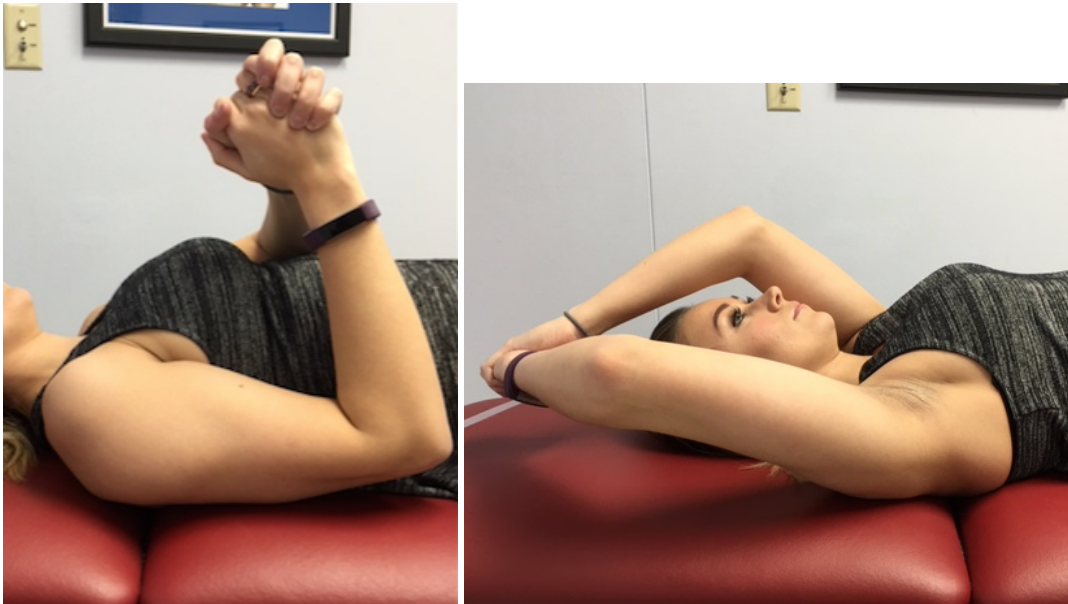
Overhead Stretch:

- Grasp the injured arm by the hand or wrist with the opposite arm
- Using the uninjured arm, pull the injured arm overhead into the position below
- Hold for about 5 seconds and repeat

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- Perform 3 sets of 10 repetitions, 3 times per day



Internal Rotation:

- Hold the injured arm on the lower end of the pole (left arm in image below)
- Hold the pole with the uninjured arm on the upper end of the pole (right arm in the image below)
- Gently pull with the uninjured arm (right arm below) allowing the uninjured arm to stretch.
- Avoid using muscles of the injured arm to move the injured extremity.



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Wrist Motion:

- The arm can remain in the sling or be done out of the sling.
- Simply extend and flex the wrist back and forth against gravity.



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- Perform about 10 – 20 reps 3 times a day.

Hand Squeezes:

- These can be performed in or out of the sling.
- You can use any soft ball (tennis, racquetball, etc). Some slings come with their own.

Squeeze the ball as many times as possible throughout the day.