

Gordon Groh MD, MBA Post Discharge Protocol

Arthroscopic Subacromial Decompression Office 828 252 7331

Pain

- Over 90% of patients take narcotics for less than 10 days after surgery
- Take over the counter Tylenol 325 tablets
 - 2 tablets every 6 hours
- If prescribed Gabapentin—take every 8 hours as directed
- If prescribed an anti-inflammatory such as Celebrex—take daily as directed
- Take oxycodone as needed for pain—begin as block begins to wear off or prior to first night sleep

Dressing Change

- Leave initial dressing in place for five days—may remove and place Band-Aids.
 - Avoid any creams or ointments until the skin is healed

Bathing

- You may shower after the first dressing change five days after surgery—no tub bathing
- Do not get incision sites excessively wet

Sling

- Wear the sling full time until the block wears off. You may wear the sling as needed for comfort after the block has dissipated. Begin working on range of motion (moving the shoulder) after the block wears off—the more motion you have by the first postoperative visit—you are more likely to transition to a strengthening program sooner.

Driving

- May contemplate driving if patient feels safe 2-3 weeks after surgery. Patient must be off all narcotic pain medications
- Patient must feel comfortable handling vehicle in emergency situations

Physical Therapy

- No therapy is indicated within the first two weeks as our initial emphasis is centered on wound healing. Greater than 95% of patients will complete their postoperative course without the need to see a physical therapist. Numerous studies have shown improved outcomes with physician directed home therapy (references at bottom of instructions).

Constipation

- Take over the counter MiraLAX and Senna (over the counter) twice per day while using narcotic pain medications.
- Take Colace as directed (prescription) while taking narcotic pain medications.

Swelling & Edema management

- Some swelling/edema is normal in the forearm/hand after shoulder surgery—although the amount can be variable
- Making a fist and squeezing a ball repeatedly during the day improves blood return and decreases swelling

Bruising/Discoloration in arm after Surgery

- Normal after surgery and blood thinners including aspirin/anti-inflammatory medications may increase bruising

Staple/Suture Removal

- Staples may be removed at the 14 days recheck if the wound appears to be healing with minimal swelling. Steri-strips are applied after staple removal and should stay in place until approximately 17 days after surgery.

Anti-Coagulation

- Aspirin 325 mg per day or Xarelto/Coumadin for higher risk patients—typical duration four weeks

CHG/Pre-operative Wash

- All total shoulder patients will receive a CHG sponge and should wash with it the night prior to surgery

Dental Precautions

- Delay elective dental procedures after surgery for 6 weeks
- Antibiotics are not typically indicated

References for Home Therapy:

Boardman ND, Cofield RH, Bengtson KA, Little R, Jones MC, Rowland CM. Rehabilitation after total shoulder arthroplasty. *J Arthroplasty*. 2001;16:483–486.

Brems JJ. Rehabilitation following total shoulder arthroplasty. *Clin Orthop Relat Res*. 1994;70–85

Effectiveness of formal physical therapy following total shoulder arthroplasty: A systematic review Peter K Edwards,¹ Jay R Ebert,¹ Chris Littlewood,² Tim Ackland,¹ and Allan Wang^{1,3}, *Shoulder Elbow*. 2020 Apr; 12(2): 136–143. PMID: 32313563

Effect of supervised physiotherapy versus home exercise program in patients with subacromial impingement syndrome: A systematic review and meta-analysis Héctor Gutiérrez-Espinoza 1, Felipe Araya-Quintanilla 2, Christopher Cereceda-Muriel 3, Celia Álvarez-Bueno 4, Vicente Martínez-Vizcaíno 5, Iván Cavero-Redondo 6 *Comparative Study Phys Ther Sport*. 2020 Jan;41:34-42. doi: 10.1016/j.ptsp.2019.11.003. Epub 2019 Nov 6.

Effectiveness of supervised physiotherapy versus home exercise in subjects with rotator cuff disorders treated surgically: A systematic review and meta-analysis. Gutiérrez-Espinoza H, Araya-Quintanilla F, Olgúin-Huerta C, Valdés-Orrego I, Sepúlveda-Osses O. *Physiother Res Int*. 2022 Apr;27(2):e1942. doi: 10.1002/pri.1942. Epub 2022 Feb 20. PMID: 35184364