

POSTOPERATIVE INSTRUCTION SHEET – **Reverse SHOULDER Replacement**

Procedure: Reverse SHOULDER Replacement

Sling Instructions: Patient is to follow the instructions for # checked. A sling or shoulder immobilizer has been placed on your shoulder to minimize discomfort and protect any rotator cuff or labral repair. To avoid developing stiffness remove your arm from the immobilizer 4 to 5 times per day to straighten your elbow, and move your wrist, and hand ONLY.

☐ #1 A sling is provided for your comfort. You may remove the sling and let your arm hang by your side if it is more comfortable. Use your arm and hand for regular, everyday activities (washing, dressing, eating, etc.)

Ice Machine (cryotherapy)

A Cryotherapy (cold therapy) cuff is applied after surgery and should be sent home with you. Icing is most important in the first 72 hours to reduce postoperative pain and inflammation in the operative area. We recommend continuing to use the ice machine liberally the first week, even at night for 20-30 minute time periods. During the 2nd and 3rd week use the ice machine 2 to 3 times a day for 20-30 minutes will help lessen the pain/inflammation.

How should I manage my surgical site, dressing?

• Keep your dressing in place. It is ok to shower with the dressing in place. Do not submerge the shoulder under water (baths or hot tubs). If the dressing becomes saturated call your doctor's office immediately



Activities:

Many shoulder patients find that lying down increases their discomfort. You may find that it is easier to sleep in a recliner or propped up in bed with a pillow supporting your elbow in a comfortable position for a few days. A sling or shoulder immobilizer has been placed on your shoulder to minimize discomfort and protect any rotator cuff or labral repair. To avoid developing stiffness, remove your arm from the immobilizer 4 to 5 times per day to straighten your elbow, and move your wrist, and hand.

- a) Let pain be your guide to activity. (too much pain = too much activity)
- b) DO NOT use exercise machines unless specified.
- c) Squeeze a small ball as much as possible to help decrease swelling.
- d) Generally if you have a job with little physical activity, you may return to work on the third post-op day with no use of the affected arm.
- e) If your job requires excessive lifting or use of your arm, then discuss return to work date with your physician
- f) NO INTERNAL ROTATION of your arm. Internal rotation (reaching behind your back or pushing up from a chair to get up) puts your new shoulder in a risky position to dislocate. Do not reach behind your back or use the arm to push your self up from a chair.

May I use my involved arm for dressing, bathing, driving, and other daily activities? How should I manage my arm in the shower?

- You may use your wrist, hand, and elbow for daily activities. This includes eating, shaving, dressing, as long as you do not move your operated arm away from your body and it does not increase your pain.
- Do not use your arm to push up/off the bed or chair for 6 weeks after your surgery.
- When using your keyboard and mouse, do not move your arm away from your body.
- When showering do not raise your arm overhead until cleared by your therapist
- Do not reach behind your back with the operative shoulder. For example do not reach to tuck in your shirt behind your back or to get your wallet out of the back pocket.

Elevation:

Sleep in bed with shoulder elevated on several pillows or sleep in recliner, for maximum comfort. Initially, lying flat is less comfortable.

A detailed rehabilitation protocol will be provided to your physical therapist specific to the type of surgery that was performed. You may bend and straighten your elbow to perform activities such as eating or using a computer. Do not lift anything heavier than a cup of coffee.

Begin doing gentle pendulum exercises the day after surgery. Lean forward at the waist and allow the arm to gently rotate and swing in a circular motion both clockwise and counterclockwise. This exercise will help prevent stiffness and will become easier each day as the pain and swelling decrease.

Pain may take days to weeks to completely subside and varies depending upon the extent of the damage that needed to be repaired. Swelling will typically decrease over the first few days to first week, and saline fluid used during the arthroscopic procedure may drain onto the bandages...this is **NORMAL**. If you experience severe and worsening pain, redness, drainage of something other than water or watery bloody material, or fever over 101 (after the first day or two), this could indicate infection, and you should contact Dr. Luedke's office if you have any concerns.

Are there any medications that I should not take during my recovery/rehabilitation?

You can take ibuprofen or any of the pain medications your surgeon prescribes. In addition, the use of frequent (3-4 times per day) icing of your shoulder will assist in pain management.

Can I smoke following surgery?

• You should not smoke after surgery as it interferes with tendon healing.

EMERGENCIES • If you have an emergency contact Dr. Luedke's office at (979) 696-3344 and he will be contacted.

- Contact the office if you notice any of the following:
 - o Uncontrolled nausea or vomiting
 - o reaction to medication
 - o fever greater than 101.5 (low grade fevers 1-2 days after surgery is normal)
 - o severe pain not relieved by pain medication/ice/elevation of leg



- o redness or continued drainage around incisions (a small amount is normal for a few days)
- o calf pain or severe swelling.
- If you are having chest pain or difficulty breathing, call 911 or go to the closest emergency room.