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MIDWEST ORTHOPAEDICS AT RUSH

POSTOPERATIVE INSTRUCTIONS
SHOULDER – AC JOINT RECONSTRUCTION

PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION IF NECESSARY - DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE SURGERY CENTER OR VIA PHONE/EMAIL TO DR COLE'S STAFF AFTER ARRIVING HOME

WOUND CARE

- Loosen bandage if swelling or progressive numbness occurs in the extremity.
- It is normal for the joint to bleed and swell following surgery — if blood soaks through the gauze, simply reinforce with additional gauze dressing for the remainder of the day and re-check.
- Remove tape and gauze 48 hours after surgery. There will be an adhesive dressing (steri-strips) directly covering the incisions. Please keep adhesive dressing in place until day 12 post-op. It is optional to replace the gauze and skin-safe tape.
- 48 hours after surgery it is ok to shower. Please keep incisions dry when showering. This can be done using plastic wrap and skin safe tape or large Tegaderm. If Tegaderm is used, be sure the sticky part of the Tegaderm is on the skin, not the adhesive dressing, as it will pull the adhesive dressing off when removing. Carefully remove Tegaderm after showering, if using, keeping the dressing in place.
- If incisions/adhesive dressing do get wet, simply pat dry with a towel.
- Do not use Band-Aids to cover the incisions for showering.
- ADHESIVE DRESSING DIRECTLY COVERING INCISIONS SHOULD REMAIN IN PLACE UNTIL 12 DAYS OUT FROM SURGERY. You will remove the adhesive dressing on your own on day 12 post-op.
- After removing the dressing on day 12, cover your incision with ½ inch steri-strips, placed perpendicular to incision for an additional 3-5 days. Steri-strips can be purchased at the drug store. Butterfly strips can be used in place of steri-strips.
- If your first post-op telemedicine appointment is after 12 days out, you should still remove the dressing on your own on day 12.
- On day 14, you may submerge incisions in water and shower with incisions uncovered.
- No suture removal is required (unless you were told otherwise), as dissolvable sutures were used.

MEDICATIONS

- You can begin the prescription pain medication provided to you upon arriving home and continue every 4-6 hours as needed for pain.
- Zofran (Ondansetron) can be taken if needed for nausea. If you are having problems with nausea and vomiting, contact the office (312-243-4244 – ask for Dr. Cole's team to be paged).
- Common side effects of the pain medication include nausea, drowsiness, and constipation. To help minimize the risk of side effects, take medication with food. If constipation occurs, consider taking an over-the-counter stool softener such as Dulcolax or Colace.
- Do not drive a car or operate machinery while taking narcotic medication.

You have been prescribed the following medications for use post-operatively, unless discussed otherwise:

1. **Pain Medication:** Unless discussed otherwise, you have been prescribed pain medication (Hydrocodone-Acetaminophen, Tylenol 3, Tramadol, etc.) for use postoperatively. Take as prescribed as needed for pain.
2. **Zofran (Ondansetron)**: Take as prescribed if needed for nausea
3. **Anti-Inflammatory**: Unless discussed otherwise, or contraindicated due to other health reasons, you have been prescribed a non-steroidal anti-inflammatory drug (Meloxicam, Celecoxib, Ibuprofen, etc.) for use postoperatively. If you have no personal history of adverse response to anti-inflammatories (NSAIDs), take as prescribed with food to help reduce swelling and pain.
4. **Aspirin 81mg**: Please take one (1) 81 mg baby aspirin twice daily for 30 days following surgery. This is to help minimize the risk of blood clot (extremely rare). If you are under age 16 or unable to take aspirin for other medical reasons, you do not need to take aspirin after surgery.

ICE THERAPY

- Beginning immediately after surgery, use the ice machine (when prescribed) as directed for the first 2-3 days following surgery. Ice at your discretion thereafter. When using "real" ice, avoid direct skin contact > 20 mins to prevent damage / frostbite of the skin. In either case, check the skin frequently for excessive redness, blistering, or other signs of frostbite. When using the ice machine, it is okay to ice continuously as long as you check the skin frequently.
- For technical questions regarding the ice machine, please contact our DME store directly.

ACTIVITY

- Wear sling at all times other than personal hygiene, wardrobe changes, and exercises (last page). The sling will be worn until you are 6 weeks out from surgery, unless you are told otherwise.
- It is ok to sleep however you are comfortable.
- Do not engage in activities which increase shoulder pain over the first 7-10 days following surgery.
- NO driving. You will be cleared to drive after the first postoperative visit if narcotic pain medication has been discontinued.
- Okay to return to work when ready and able. Please notify the office if written clearance is needed.
- Air travel is permitted 5 days after surgery. Air travel and immobility increase the risk of blood clots. Unless you have been previously instructed to avoid aspirin products for medical reasons or you are under age 16, ensure that you are taking 81 mg baby aspirin twice daily beginning the day after surgery to minimize the risk of blood clot.

EXERCISE

- Begin exercises 3x daily starting the day after surgery (wrist flexion/extension and elbow flexion/extension ONLY) unless otherwise instructed. See last page for reference. If the exercises cause pain, stop and try again later in the day.
- Shoulder stiffness and discomfort is normal following surgery.
- Avoid movement of the arm against gravity or away from the body.

EMERGENCY HOTLINE #312-243-4244

- Formal physical therapy (PT) will begin after your first postoperative telemedicine visit or no sooner than 7 days after surgery. Visit rushortho.com to see our recommended Midwest Orthopaedics at Rush PT locations. Reach out to your chosen PT location as soon as possible to schedule PT to start after your first post-op visit.

DIET

- Begin with clear liquids and light foods (jello, soup, etc.).
- Progress to your normal diet as tolerated.

FOLLOW-UP CARE/QUESTIONS

- Someone from Dr. Cole's team will call you on your first day after surgery to address any questions or concerns. If you have not been contacted within 48 hours of surgery, please call 312-432-2379 or email colepa@rushortho.com
- Email any non-emergency questions to colepa@rushortho.com for the fastest reply. If e-mail is not an option please call the practice at 312-432-2379.
- Unless otherwise specified, initial postoperative visit will be a telemedicine PA visit 7-14 days from surgery. If you do not already have a postoperative appointment scheduled, please contact the scheduler during normal office hours at 708-236-2701 or email coleadmin@rushortho.com to arrange a telemedicine visit 7-14 days from surgery.

EMERGENCIES

- Contact Dr. Cole's practice hotline at 312-243-4244 if any of the following are present:
  - Unrelenting pain, despite taking medications as prescribed
  - Fever (over 101°). It is normal to have a low-grade fever following surgery
  - Continuous drainage or bleeding from incisions (a small amount of drainage is expected)
  - Difficulty breathing
  - Excessive nausea/vomiting uncontrolled by Zofran

DO NOT CALL THE HOSPITAL OR SURGICENTER FOR EMERGENCIES

IF YOU HAVE A NEED THAT REQUIRES IMMEDIATE ATTENTION, PROCEED TO THE NEAREST EMERGENCY ROOM

EMERGENCY HOTLINE #312-243-4244

SHOULDER POST OPERATIVE EXERCISES

EMERGENCY HOTLINE #312-243-4244

WRIST FLEXION / EXTENSION

Actively bend wrist forward.
Then backwards as far as you can.
Repeat 10-15 times. Do 3 sessions per day.

ELBOW FLEXION / EXTENSION

With palm either UP, DOWN, or THUMBSIDE UP
gently bend elbow as far as possible.
Hold for 5 seconds.
Then straighten arm as far as possible.
Repeat 10-15 times. Do 3 sessions per day.
****DO NOT PERFORM THIS EXERCISE IF BICEP TENODESIS WAS PERFORMED****

EMERGENCY HOTLINE #312-243-4244