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Arthroscopic/Open Shoulder Stabilization with Bone Augmentation Postoperative Instructions

● Wound Care:

- After surgery, the wound is covered with gauze pads and tape(Tegaderm). Due to the large amount of fluid used during arthroscopy, it is normal to see some bloody drainage on the dressings. If bright red blood soaks through the dressings, please call Dr. Frank's office.
- The dressing can be **removed after 3 days** and wounds covered with dry gauze or waterproof Band-Aids. **Do not remove the steri-strips or cut any of the visible sutures.** There may be some incisions that do not have steri-strips over them.
- **Showering:** Once bandages are removed, you may shower with water-proof band-aids overincision and steri-strips. Please take caution as to not pull off steri-strips when removing band-aids.

● Medications:

- **Pain Control:** Local pain medication is injected into the knee during surgery – this will wear off within 4-6 hours. Most patients will require some narcotic pain medication (i.e. hydrocodone, or other codeine-derivative) for a few days after surgery – please take as instructed. It is important not to drink alcohol or drive while taking narcotic medication. If your pain is minimal, you may discontinue the use of narcotics.
- **Other Medications:**
 - Ibuprofen 600-800 mg (i.e. Advil) can be taken every 8 hours as needed to help with swelling and pain.
 - Zofran is an anti-nausea medication and it is recommended to be taken while on narcotic medication.
 - Cyclobenzaprine is a muscle relaxer that will help with muscle spasms after surgery.
- **Constipation:** The use of narcotics can lead to constipation. Adequate hydration, over-the-counter stool softeners, and mobility can minimize constipation problems.
- **Normal medications:** Resume the day after surgery unless otherwise instructed.

- **Sling/Immobilizer:** Unless otherwise instructed, you should wear your postoperative sling/immobilizer at all times, including while sleeping. The sling can be taken off for showering; however, care must be taken to protect the shoulder at all times.

- **Activity:** You may only use your arm to assist with eating and personal hygiene unless specifically instructed not to by Dr. Frank or the team. You may not bear-weight or lift anything heavier than a cell phone or cup of coffee with your operative arm. Be sure to use and move your hand, wrist, and elbow in order to decrease swelling in your arm. While exercise is important, don't over-do it.

Shoulder Stabilization with Bone Augmentation Post Operative Instructions



- **Ice Therapy:** Icing is very important for the 2 weeks after surgery to decrease swelling and pain. Please ice in 20-30 minute sessions, unless instructed otherwise. Patients who have rented/purchased ice therapy may ice more continuously for 30-60 minute sessions. Care must be taken with icing to avoid frostbite to the skin.
- **Sleep:** Sleeping can be uncomfortable for the first 1-2 weeks after shoulder surgery. It can be helpful to sleep in a recliner-chair or in a semi-upright position using several pillows.
- **Diet:** The anesthetic drugs used during your surgery may cause nausea for the first 24 hours. Following surgery, begin with clear liquids and light foods. You can progress to your normal diet if not nauseated. If nausea and vomiting become severe, or if you show signs of dehydration (lack of urination), please call Dr. Frank's office.
- **Driving:** No driving until permitted by surgical team.
- **Work/School:** May return to sedentary work or school 3-4 days after surgery, if pain is tolerable

Follow-Up Care/Questions:

- Dr. Frank, Kati Schantz, PA-C or Kevin Shinsako, PA-C will call you after your surgery. If you have not been contacted within 48 hours of surgery, please reach out to Dr. Frank's office.
- If you do not already have a postoperative appointment scheduled, please contact the office during normal office hours. Appointments should be arranged 7-14 days from surgery.
- Please call **(720) 848-8200** with any questions or concerns at any time.

URGENT Information and Contacts:

- A low-grade fever (up to 100.5 degrees) is not uncommon in the first 48 hours. Please call the office with any temperature over 101 degrees.
- Please call the office if you have severe pain that your pain medication does not relieve, concerns of persistent numbness of the arm/hand(beyond expected duration of a nerve block), fever over 101 degrees, difficulty with the splint(if applicable) or surgical incisions, difficulty breathing, chest pain, excessive nausea/vomiting, or if you experience redness or swelling, including your calf.
- If unexpected problems occur and you need to speak to someone, please call our office (720-848-8200). **If calling after office hours or on the weekend, you may reach the resident or fellow on call.** The resident or fellow on call may not be on Dr. Frank's service and may not be familiar with your case, but will be able to direct any questions directly to Dr. Frank.
- **If you have an emergency that requires immediate attention, proceed to the emergency room.**

Shoulder Stabilization with Bone Augmentation Post Operative Instructions



Post Operative Shoulder Exercises



Elbow Pronation/Supination: Place elbow on center of Dina Disc. Alternate pronation and supination "rotating your forearm."



Elbow Flexion Extension: Grasp your wrist and slowly straighten your elbow. Use your non surgical hand to lift your hand and bend the arm