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Discharge Instructions for Total/Reverse/Hemi Shoulder Replacement

Diet: Start out with liquids and progress to your regular diet as you tolerate.

Activity: Do not perform any strenuous activity until cleared by Doctor. You must wear your sling as prescribed by your Doctor.

Pain Medication: A prescription was electronically sent to your preferred pharmacy the day before your procedure. Take this medicine for severe pain only. You may also use Advil/Motrin, an over the counter medication if you choose. Any activity that requires precise thinking and accuracy must be avoided while on narcotics after surgery, which includes operating machinery and/or driving a vehicle.

Ice: Ice is an excellent source of pain relief, swelling, stiffness and inflammation. Use it for a 20 minute duration a few times per day. The ice pack should never be placed directly on the skin. It can be used for several weeks as needed.

Return Visit: Your post-op appointment with your Doctor has been scheduled and is listed in the paperwork that you should have received in the mail and on your discharge packet. If you need to change the date and/or time, please call (302) 655-9494.

Emergency or Problems: DOS staff is available 24 hours a day in case you experience any problems once you leave the surgical facility. After hours, please call (302) 655-9494 for assistance.

Wound Care: Your incision is closed with sutures and steri-strips. It will usually drain or leak after you have returned home. Do not become alarmed unless you consider the volume or color of the drainage to be excessive. Starting 48 hours after your surgery, you should take the dressing off, and apply a fresh dressing. Do not remove the steri-strips or sutures. You will need to keep your incision away from water until your stitches or staples are removed.

Showering: You may shower with the Aquacele dressing in place. Do not place the shoulder directly under the water stream out of caution, but it may get wet.

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Suture Removal: Your bandage will be removed at your first post-operative appointment. Please keep the Aquacele dressing in place.

Upper Extremity Surgery

- Be prepared that you may not be able to lift your arm up to wash you face or hair for a period of time
- A place to sleep comfortable, as sleeping when lying down may be uncomfortable (use of a recliner)
- Extra ice pack (one (1) pound bag of peas or corn works great.) Ice pack should not be placed directly on skin.
- A means of transportation, you may be limited from driving for a period of time. Due to multiple reasons, not able to drive while on Narcotics, no use of arm to drive safely, etc…
- Stress ball to work on gripping exercises post surgery

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Shoulder Replacement Guidelines

Week 0 – 2:

1. Sling for comfort and sleep
2. ROM exercises per sheet
3. Ice 20 min on every hour
4. Start Physical Therapy
5. Start Pulley in Flexion at 7 days

Week 3 – 4:

1. Sling as needed
2. Continue ROM exercises
3. Continue to ice

Week 5 – 12:

1. Start strengthening exercises per PT
2. Continue ROM

Week 13 – 26:

1. Continue to gain ROM
2. Continue to gain strength
3. Improve functional activities

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SHOULDER CRADLE ROCK

Hold arms in front of body, cradling the injured arm with good arm. Gently rock arms back and forth using the good arm. Hold for 5 sec. Perform 15 times. Repeat 2-3 times per day.



Shoulder Shrug with Roll

SAFE TO PERFORM AFTER SURGERY

Raise shoulders upward towards ears then roll backwards and around as far as you can. Motion simulates a drawing of a backwards "D". Then return back to starting position. Perform 15 times. Repeat 2-3 times per day.



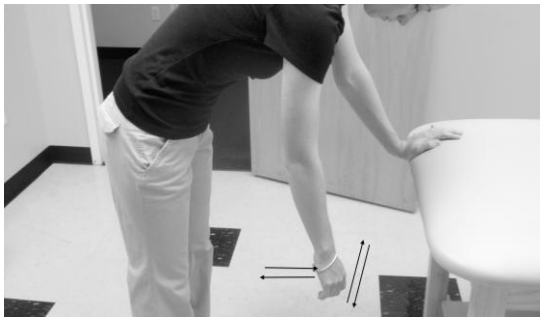
PENDULUM SWINGS - CIRCLES

Lean over table as shown, supported by your good arm. Allow the injured arm to hang freely. Use trunk movement to swing in a circular motion. Your arm should continue to swing freely with this performance, DO NOT tighten muscle/stiffen arm to perform. Clockwise and counter clockwise. Perform 20 times in each direction. Repeat 2-3 times per day.



PENDULUM SWINGS – BACK AND FORTH/SIDE TO SIDE

Lean over table as shown, supported by your good arm. Allow the injured arm to hang freely. Use trunk movement to swing side to side and forwards/backwards. Your arm should continue to swing freely with this performance, DO NOT tighten muscle/stiffen arm to perform. Perform 20 times in each direction. Repeat 2-3 times per day.



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EXERCISES ON THIS PAGE MAY BE MORE DIFFICULT TO PERFORM AND OK TO WAIT UNTIL CLOSER TO POST-OP APPOINTMENT TO BEGIN

Passive ROM Stretch Shoulder Abduction Sitting

Sit with side next to table, place forearm on table with palm up as shown. Gently side bend at waist, moving hips away form table and chest toward the table. Hold for 10 seconds and perform 10 times. Repeat 3 times per day.

*Do not force past comfort range – only pull until you feel a slight stretch along the arm.



Passive ROM Stretch Shoulder Flexion with Trunk Bending

Sit at table, with table in front of you. Place arm on table with elbow straight, slowly bend trunk downward. Your arm will slide forward on table should feel stretch in shoulder. Hold for 10 seconds and perform 10 times. Repeat 3 times per day.

*Do not force past comfort range – only pull until you feel a slight stretch along the arm.



Passive ROM Shoulder Flexion Supine

Lie on your back. Grab wrist of the injured arm with the hand of your good arm. Gently raise arm upward and in front, through range of motion. DO NOT let your elbow bend. Slowly, return to the starting position and repeat. Hold for 10 seconds and perform 10 times. Repeat 3 times per day.

