

POST-OPERATIVE INSTRUCTIONS

# Total Shoulder Replacement

Shoulder Arthroplasty (Anatomic or Reverse)

Questions or a problem after surgery? Call Dr. Wichman's office at **414-479-7000**.

## Diet

1. Begin with clear liquids and light foods (jello, soup, toast, etc...)
2. Progress slowly back to your pre-op diet as tolerated
3. Try to avoid taking narcotics on an empty stomach to avoid nausea

## Wound Care

1. Take good care of your operative dressing. You may loosen the bandage if elbow, wrist, or hand swelling occurs.
2. It is normal for the shoulder to bleed slightly and swell after surgery.
3. If blood soaks through the dressing, do not panic. Reinforce with additional dressings as needed.
4. Remove your surgical dressing on the second post-operative day, unless instructed otherwise.
5. If steri-strips are present, they should remain in place until your first post-operative visit.
6. To avoid infection, keep surgical incisions clean and dry. Cover with waterproof bandages for showering. NO immersion of the arm in water (i.e., bath).

## Medications

1. A local or regional anesthetic block is often used during surgery and will wear off in approximately 8-24 hours. Begin your prescribed pain medication before the block fully wears off so you stay ahead of the pain.
2. Most patients will require a short period of narcotic pain medication. This should be taken as directed on the bottle.
3. Norco (hydrocodone/Tylenol) or Percocet (oxycodone/Tylenol)
4. Take 1-2 tablets every 4-6 hours as needed for pain.
5. Maximum of 12 pills per 24 hour period.
6. Do NOT take additional Tylenol (acetaminophen) while taking these medications. Many products contain this medication (cough meds, cold meds) and can lead to liver damage.
7. Common side effects of narcotic pain medications are nausea, drowsiness, and constipation. Use a stool softener (Colace, senokot) or laxative (Miralax) as needed.
8. If you are having problems with nausea and vomiting, call the office to see if the medication should be changed or additional medications prescribed.
9. Journavx (suzetrigine): If you were prescribed Journavx, take 2 tablets (your one-time starting dose) with a small sip of water before leaving home the morning of surgery. Then take 1 tablet every 12 hours, starting 12 hours after your first dose, as directed. Take the starting dose on an empty stomach, and avoid grapefruit while taking this medication.
10. Do not drive a car or operate heavy machinery while taking narcotics.

## Activity

1. When resting or sleeping, a reclined position (a recliner, or propped up on pillows) is usually more comfortable than lying flat.
2. Keep your operative arm at your side. Do NOT actively lift the arm, reach overhead, or use the arm to push up from a chair or bed.
3. Do NOT reach behind your back or out to the side, and do not let the arm rotate outward past a neutral (straight-ahead) position — these movements protect the repaired muscle and the new joint.
4. Avoid combining reaching across your body with rotating your hand inward, which can stress a reverse replacement.
5. Do not bear weight through the arm or lift anything heavier than a coffee cup until cleared. These precautions typically continue for about 6 weeks, and sometimes longer, per your surgeon.
6. No driving until cleared by your medical team.
7. You may return to sedentary, one-handed work within a few days if pain is tolerable.

## Sling

1. You will be discharged wearing a sling. Wear it at all times, including while sleeping, except for hygiene and prescribed exercises.
2. The sling is typically worn for about 4-6 weeks. Your surgeon will tell you your exact duration — often shorter for a reverse replacement, and longer if a tendon was repaired.

## Ice Therapy

1. Begin immediately after surgery
2. Use ice machine or ice packs every 2 hours for 20 minutes until your first post-operative visit.
3. If an ice machine was prescribed, may use continuously until first post-operative visit. Remember to protect the skin to avoid thermal injury (frostbite)

## Exercise

1. Begin elbow, wrist, and hand range of motion on the first post-operative day, several times daily, to keep them from getting stiff.
2. Do NOT perform active shoulder motion (raising the arm on its own) until cleared. Gentle pendulum or passive motion may begin only as directed by your surgeon.
3. Formal physical therapy will be arranged and progressed by protocol. Attendance is important — full recovery after a shoulder replacement generally takes 9-12 months.

## When to Call Us

Contact Dr. Wichman at 414-479-7000 if any of the following are present:

- Painful swelling or numbness
- Unrelenting pain
- Redness around incisions
- Fever (above 101.5°F) - It is not uncommon to have a low-grade fever for the first day or two following surgery.
- Color changes in fingers, hand, or arm

- Continuous drainage or bleeding from incisions (a small amount of drainage is expected.)
- Difficulty breathing
- Excessive nausea or vomiting

*If you have an emergency after hours or over the weekend, call 414-479-7000 to be connected to the "on-call" physician or physician assistant. Do NOT call the hospital or surgery center.*

*If you have an emergency that requires immediate attention, call 911 or proceed to the nearest Emergency Room.*