

Travis G. Maak, MD Sports Medicine University of Utah Orthopaedics 590 Wakara Way Salt Lake City, UT 84108

Shoulder Arthroscopy Post-Operative Instructions

PAIN

- Most patients require some narcotic medication after surgery. You will be given a prescription(s) with instructions for its use. Do not take more than prescribed. If your pain is not adequately controlled, contact the surgeon on call. Phone numbers are provided.
- o If you had a nerve block, please contact Dr. Swenson with questions. He will provide you with the contact information. When the nerve block wears off, pain can increase so you may notice you will need more oral narcotics at that time.
- Common side effects of the narcotics include nausea, vomiting, drowsiness, constipation, and difficulty urinating. If you experience constipation, use an over the counter laxative. Minimize the risk of constipation by staying well hydrated and including fiber in your diet. If you have difficulty urinating, try spending a little time out of bed on the crutches. If it is not possible for you to urinate and you become uncomfortable, it is best if you go to the Emergency Room to get catheterized.
- Contact the office if you have nausea and vomiting. This is usually caused by the
 anesthesia or narcotics. We will either give you a medication for nausea at time
 of surgery or we will call it in to a pharmacy if you experience these symptoms.
- o Do not drive or make important business decisions while using narcotics.
- Anti-inflammatories (advil, naprosyn, aleve, etc) may be taken in conjunction with the pain medication to help reduce the amount of narcotics needed. Do not take extra Tylenol if the pain medication given to you already has Tylenol in it.

WOUND CARE

- o It is common for some staining of the bandage to occur. If this happens, reinforce the area with additional bandages.
- Keep dressing dry and clean. You may remove the surgical bandages 2 days after surgery unless otherwise informed. Leave the steri-strips (sticky strips over incision) and/or sutures in place and do not remove. Redress the incision with a light dressing.
- To avoid problems with infection, keep incision clean and dry. Cover incision with saran wrap while showering for the first week. Do not soak incision (bath, hot tub) until the skin is fully healed. If there is any concern about the incision, please call the on call sports surgeon at the University of Utah.
- A low grade temperature is very common within the first few days of surgery. This
 can often be treated with getting out of bed in a sitting or standing position,
 deep breathing and coughing to clear the lungs. If fevers, pain or swelling
 continue, please call.

ACTIVITY

- Activity with your arm will be determined depending upon the surgery performed.
 Regardless of surgical procedure, it is usually OK to do very light activities in front of your body. Over the first week, give your shoulder time to rest and get more comfortable unless told otherwise. Some procedures require immediate motion.
- o May return to sedentary work or school in 3-7 days if tolerated.



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DIET

 Begin with clear fluids and light foods (jello, clear broths). Progress to a regular diet as tolerated.

BRACE

- o Following surgery, you will either have a sling or an immobilizer.
 - Simple sling
 - Used for comfort. May discontinue the sling once comfortable.
 - Do gentle activities in front of body as tolerated. Increase activity to full as comfort allows.
 - Immobilizer
 - Wear during the day and night.
 - Only take off for hygiene and for gentle elbow and wrist motion.
 - Only do exercises if asked by your physician.

ICE

o Ice for 30 minutes on, 30 minutes off until swelling subsides. This can help with pain.

EXERCISE

o If therapy is needed, it will usually begin after the first post operative visit. Some procedures require immediate motion. Your physician will let you know if you should work on motion immediately.

CONCERNS/QUESTIONS

- If you feel unrelenting pain, notice incision redness, continuous drainage or bleeding from wounds, continued fevers greater than 101°, difficulty breathing or excessive nausea/vomiting, please call (801) 587-7040 during regular office hours or (801) 587-7100 (physicians' answering service) after 4:00 pm or on weekends.
- If you have an emergency that requires immediate attention, proceed to the nearest Emergency Room.

FOLLOW UP APPOINTMENTS

o If you do not already have a follow up appointment scheduled, please call (801) 587-7109 during normal office hours and ask to schedule an appointment. I would like to see you back in 6 weeks. However, if there are any post-operative surgical concerns, please call and we will get you in sooner. I am also happy to see you at 2 weeks after surgery if you would like to come in and go over the results of the surgery at an earlier date.

STUDY PATIENTS

- We thank you for participating in clinical studies. Our intention is to improve your care and the care of future patients.
- o If you have any questions regarding the study, please call the numbers provided on the study documents or you may contact the office numbers provided below.



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IMPORTANT NUMBERS

- Questions
 - During Office Hours (8:00-4:00)
 - Cassidy (Medical Assistant) 801-587-7040
 - Nikki Cooper (Practice Coordinator) 801-587-0989
 - Mark Beese (ATC) 801-587-1473
 - After Hours (Tell the hospital operator your surgeon's name and they will contact the appropriate on call physician)
 - 801-581-2121
- o Office Appointment Scheduling
 - **8**01-587-0989
- Surgery Scheduling
 - Francoise 801-587-7187
- Physical Therapy
 - **8**01-587-7005
- o Toll Free
 - **1**-800-824-2073
- o Dr. Maak Fax
 - **8**01-587-3990