

# DISCHARGE INSTRUCTIONS FOR SHOULDER SURGERY

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## A. GENERAL ACTIVITY

1. **Yes / No** Driving
2. **Yes / No** Sex
3. **Yes / No** Return to work
4. Walk as tolerated, indoors or outdoors, with sling or Cryocuff in place to support arm.
5. Keep a pillow behind elbow when seated or lying down to maintain the arm in a forward position.

## B. WOUND CARE

1. For arthroscopic procedures, remove outer dressing in 2 days, but *don't remove* white steristrips. For open procedures, leave plastic cover in place, if present.
2. Shower in 3 days - water may hit the incisions, but do not scrub the incision area. If a plastic cover is over the incision, water may hit it in the shower. Dangle your arm at your side.
3. If you develop fevers, chills, or shakes, or if your incision develops discharge, contact us immediately at 516/798-0111 or go directly to the emergency room.
4. Do not lift, push, pull, or carry anything with the operated arm/hand.

## C. EXERCISES

1. **Yes / No** If yes, start motion exercises as able in \_\_\_\_ days with Pendulum motions, and with stick exercises while lying on your back. Do not use a pulley or elastic bands. If no, remain in sling until follow-up appointment.
2. **Yes / No** Move elbow as able on the arm that was operated on.
3. Move wrist and hand as able on the arm that was operated on.
4. Move both of your ankles up and down at least 20 times an hour

## D. ADDITIONAL INSTRUCTIONS

1. Use Cryocuff as often as possible/able. If you do not have a Cryocuff, apply a 2-pound bag of frozen vegetables (such as peas) over a towel to your shoulder for up to 20 minutes every hour.
2. If swelling of your arm develops, maintain elevation as able above the level of your heart by positioning your body if you are unable to re-position your arm. If the swelling persists, or if numbness develops, contact our office or go directly to the emergency room.
3. **Yes / No** If present, anesthetic pump is automatically set to administer medication to decrease pain. If there is a button, you may push it every **15 30 60** minutes for additional pain relief. On \_\_\_\_\_ **afternoon**, push the button fully if present, remove the outer dressing, remove the strips of tape around the tube, pull out the tube, cover the hole with a band-aid, and apply pressure for 1 to 2 minutes. If pump malfunctions, call number listed on instruction sheet.
4. **Yes / No** If you been using an incentive spirometer, use as instructed
5. **Yes / No** If prescribed, start physical therapy in \_\_\_\_\_ days.

## E. MEDICATIONS

1. Vicodin ES 1 or 2 tablets every 4 to 6 hours as needed for pain
2. Toradol 1 tablet with food every 6 hours as needed for pain (A pain reliever in the NSAID class.)  
[Note: Vicodin and Toradol may be taken in time periods that overlap.]
3. Duricef 1 tablet every 12 hours until finished  
[Note: Duricef may be prescribed if the Anesthetic pump is used.]

**CALL:** 516/798-0111 on the next business day to arrange for follow-up in \_\_\_\_ **days**.

**CALL:** 516/798-0111 if you have any questions or concerns.

PHYSICIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_