



Mayo Clinic 600 Hennepin ave, Minneapolis , MN

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SHOULDER ARTHROSCOPY

Post-Operative Instructions

**Please note that the instructions provided below are general guidelines to be followed; however, any written or verbal instructions provided by Dr. Okoroha or his team supersede the instructions below and should be followed.

WOUND CARE

- After surgery, the wound is covered with gauze and ace wraps. These should be left in place for 3 days.
- 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. Okoroha's office.
- If blood soaks through the bandage, do not become alarmed, reinforce with additional dressing
- After 3 days, the dressing can be removed and wounds covered with dry gauze or waterproof Band-Aids.
- Do not remove the paper tapes/strips or cut any of the visible sutures. You can reapply the ace wrap to control swelling.

SHOWERING

- You can shower directly over the band-aids beginning on the **3rd post-operative day** as long as the incisions stay dry until your first post-operative appointment in clinic.
- NO immersion in a bath until given approval by our office.

ICE THERAPY

- Icing is very important in the initial post-operative period and should begin immediately after surgery.
- Use ice machine continuously to ice for 45 minutes every 2 hours daily until your first post-operative visit.
- Use the ice machine (when prescribed) as directed for the first 2-3 days following surgery. Ice at your discretion thereafter.
- When using "real" ice, avoid direct skin contact > 20 mins to prevent damage / frostbite of skin. In either case, check the skin frequently for excessive redness, blistering or other signs of frostbite.
- Remember to keep the extremity elevated while icing when able.
- For technical questions regarding the ice machine, please contact the vendor directly using the telephone number on the device.







MEDICATIONS

- Local anesthetics are injected into the wound and joint at the time of surgery. This will wear off within 8-12 hours and it is not uncommon for patients to encounter more pain on the first or second day after surgery when swelling peaks.
- It is recommended to begin the prescription pain medication provided to you upon arriving home, and continue every 4 hours for the first 1-2 days after surgery.
- Common side effects of the pain medication are nausea, drowsiness, and constipation. To decrease
 the side effects take the medication with food. If constipation occurs, consider taking an over the
 counter stool softener such as Dulcolax or Colace or a laxative.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medications changed.
- Do not drive a car or operate machinery while taking the narcotic medication.
- If you are having pain that is not being controlled by the pain medication prescribed, you may take an over the counter anti-inflammatory medication such as ibuprofen or naproxen in between doses of pain medication. This will help to decrease pain and decrease the amount of narcotic medication required. Please take as directed on the bottle.
- For **3 weeks following surgery take a blood thinner as prescribed** to lower the risk of developing a blood clot after surgery. Please contact the office should severe distal arm pain occur or significant swelling of the distal arm and/or hand occur.

ACTIVITY

- Unless otherwise instructed, you should begin the pendulum and gentle passive range-of-motion exercises as demonstrated on the exercise handout on the first day after surgery.
- You may use your arm to assist with eating and personal hygiene unless specifically instructed not to by Dr. Okoroha.
- 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. Common sense is the rule.
- NO driving until off narcotic pain medication.
- Okay to return to work when ready and able. Please notify office if written clearance is needed.
- If you are planning air travel within 10 days of your surgery, please consult with Dr. Okoroha's office to discuss whether anticoagulation (medication to prevent blood clot) is necessary.

SLING/IMMOBILIZER

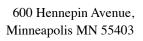
- Unless otherwise instructed, you should wear your postoperative sling/immobilizer at all times, including while sleeping.
- The sling can be taken off for showering; however, care must be taken to protect the shoulder at all times.

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.









EXERCISE

- Begin exercises 3x daily starting the day after surgery (wrist flexion/extension, elbow flexion/extension, shoulder range of motion, pendulum swings) unless otherwise instructed. See attached pictures of exercises for reference. Three sets of 10-15 repetitions each is advised. If the exercises cause pain, stop and try again later in the day.
- Shoulder stiffness and discomfort is normal for a few days following surgery.
- Avoid movement of the arm against gravity or away from the body.
- Formal physical therapy (PT) will begin after your first post-operative visit if necessary

EMERGENCIES**

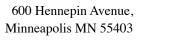
- Contact Dr. Okoroha's PA at OkorohaPA@gmail.com if any of the following are present:
 - Painful swelling or numbness (note that some swelling and numbness is normal)
 - Unrelenting pain
 - Fever (over 101° it is normal to have a low grade fever for the first day or two following surgery) or chills
 - Redness around incisions
 - Color change in distal arm and/or hand
 - Continuous drainage or bleeding from incision (a small amount of drainage is expected) ·
 - Difficulty breathing
 - Excessive nausea/vomiting
 - Calf pain
- If you have an emergency **after office hours** or on the weekend, contact the service line at **507-284-4300** and you will be connected with someone who can help. If you have an emergency that requires immediate attention proceed to the nearest emergency room.

FOLLOW-UP CARE/QUESTIONS

- If you do not already have a post-operative appointment scheduled, please contact the our scheduler at 612-502-5386 to schedule.
- Typically the first post-operative appointment following surgery is 10-14 days following surgery
- The first post operative appointment may be with one of the Physician Assistants. They will assess the wound, and answer any questions you may have regarding the procedure
- If you have any further questions please contact Dr. Okoroha's physician assistant at OkorohaPA@gmail.com for the fastest response. If e-mail is not an option please call the practice at 612-313-0531









SHOULDER EXERCISES

WRIST FLEXION / EXTENSION



Actively bend wrist forward.

Then backwards as far as you can.

Repeat 10-15 times. Do 3 sessions per day.

ELBOW FLEXION / EXTENSION



With palm either UP, DOWN, or THUMBSIDE UP gently bend elbow as far as possible.

Hold for 5 seconds.

Then straighten arm as far as possible. Repeat 10-15 times. Do 3 sessions per day.

DO NOT PERFORM THIS EXERCISE IF BICEP TENODESIS WAS PERFORMED

SHOULDER RANGE OF MOTION

(Self-stretching activity)

Slide arm up wall with palm toward you by moving closer to the wall. Hold 10-15 seconds. Repeat 3 times. Do 3 sessions per day.



PENDULUM SWINGS

(Clockwise/counterclockwise)



Let arm move in a clockwise circle, then counterclockwise by rocking body weight in a circular pattern. Repeat 10-15 times. Do 3 sessions per day

PENDULUM SWINGS

(Side to side)



Gently move arm from side to side by rocking body weight from side to side. Let arm swing freely. Repeat 10-15 times. Do 3 sessions per day



