

Shoulder Arthroplasty (Replacement) Instructions

- Before Surgery
 - We will provide a simple sling that is adequate in hospital.
 - If you want to purchase your own sling, please have your sling fitted before surgery, the Ultrasling is a good choice, and Kinnetic Connection will set it up for you.
 - I suggest having ice packs or a cooling unit, this will help minimize pain after surgery.
 - Plan to be in a sling full-time for six weeks. You cannot drive and will likely prefer sleeping in a reclining chair or semi-sitting.
 - Make a plan for meal preparation etc., you should not use your surgical arm for anything beyond simple grasping and may not feel up to commuting/working for weeks.
- After Surgery
 - You will stay in hospital for 1 night after surgery, plan to have a drive home mid-morning. Some patients may be fit for day surgery.
 - Your incision will be closed with clips, and a gauze dressing will be applied and some bleeding is normal, but should diminish steadily over the first 2-4 days, and be dry thereafter.
 - You can shower and get the incision wet with gentle soap and water after 3 days.
 - Replace your bandage daily if it is soiled, or after showering.
 - When dressing, slip a shirt over your surgical arm first, to avoid lifting the arm away from your side.
- Precautions
 - Avoid external rotation (rotating your forearm away from the abdomen)
 - The sling protects the subscapularis tendon repair (stabilizing your shoulder replacement) from excessive force and re-tears. Wear it full time aside from bathing and therapy.
 - Do not push yourself out of a chair with your surgical arm; make sure your elbow stays in front of your torso as you get up.
 - Do not allow someone to pull on your surgical arm.
- Infection
 - Signs of infection include:
 - spreading redness from the incision
 - increasing discharge from the incision
 - fevers/chills or feeling unwell
 - If you are concerned for infection, please call the office so that I can assess you. Do not start antibiotics from another physician, it may complicate my assessment.

- Pain Control
 - If you have a 'nerve block' performed, begin taking your narcotic pain medication before your pain returns, around 10pm and set a timer to take it every 4 hours for the first few days.
 - The nerve block will wear off over 10-16 hours.
 - Adding in Acetaminophen to a maximum of 4000mg/24hrs (from all sources) and an anti-inflammatory (Ibuprofen or Naproxen) can help your pain control.
 - Regular ice and cold therapy is important, apply it directly to the shoulder when the nerve block has worn off.
 - Narcotic pain medications
 - Are habit forming, so tapering the frequency of tablets over the first week is suggested.
 - Regular stool softener and good water intake can minimize constipation.
- Physiotherapy
 - First 2 weeks
 - Move your fingers and wrist fully to minimize stiffness. Some swelling of the arm and hand is normal in response to the surgery and immobilization.
 - Elbow motion, taking off your sling with your arm at your side twice a day can reduce stiffness.
 - See your physiotherapist within the first two weeks post-surgery.
 - 6 weeks post-op
 - Discontinue the sling and begin to regain shoulder range of motion, focusing on external rotation and elevation
 - Visiting with a physiotherapist is necessary at this point and exercises should be done daily.