



POSTOPERATIVE INSTRUCTIONS ARTHROSCOPIC ROTATOR CUFF REPAIR AND OPEN BICEPS TENODESIS

DIET:

- Begin with clear liquids and light foods (jellos, soups, etc.)
- Progress to your normal diet if you are not nauseated

WOUND CARE

- Maintain your operative dressing, loosen bandage if swelling of the elbow, wrist, or hand occurs
- It is normal for the shoulder to bleed and swell following surgery – if blood soaks through the bandage, do not become alarmed – reinforce with additional dressing
- Remove surgical dressing 48-72 hours post-operative – if minimal drainage is present, apply waterproof band-aids over incisions and change daily
- To avoid infection, keep surgical incisions clean and dry – you may shower by placing a large garbage bag over your sling starting the day after surgery – NO immersion of operative arm (i.e. bath, hot tub, swimming pool)

MEDICATIONS

- Pain medication is injected into the wound and shoulder joint during surgery – this will wear off within 8-12 hours
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle
- Primary Medication = Percocet (Oxycodone/Acetaminophen)
 - Take 1 – 2 tablets every 4 – 6 hours as needed
- Max of 12 pills per day
- Plan on using it for 2 to 5 days, depending on level of pain
- Do **NOT** take additional Tylenol (Acetaminophen) while taking Percocet
 - Common side effects of the pain medication are nausea, drowsiness, and constipation – to decrease the side effects, take medication with food.
 - Zofran (Ondansetron) has already been called into your pharmacy for nausea if needed.
 - If constipation occurs, consider taking an over-the-counter laxative such as Colace or Miralax.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed ((843) 654-8868– ask for Nicole Fava, Dr. Haro's PA)
- Do not drive a car or operate machinery while taking the narcotic medication

- Ibuprofen 400-600mg (i.e.-. Advil) may be taken in between the narcotic pain medication to help smooth out the post-operative ‘peaks and valleys’, reduce overall amount of pain medication required, and increase the time intervals between narcotic pain medication usage

ACTIVITY

- When sleeping or resting, inclined positions (i.e. reclining chair) and a pillow under the forearm for support may provide better comfort
- Do not engage in activities which increase pain/swelling (lifting or any repetitive above shoulder level activities) over the first 7-10 days following surgery
- Avoid long periods of sitting (without arm supported) or long distance traveling for 2 weeks
- NO driving until instructed otherwise by physician
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable and no use of operative arm.

IMMOBILIZER

- Your immobilizer should be worn at all times, including sleep. May be removed for hygiene.

ICE THERAPY

- Begin immediately after surgery
- Use icing machine continuously or ice packs (if machine not prescribed) every 2 hours for 20 minutes daily until your first post-operative visit – remember to keep arm supported while icing
 - The IceMan device may be used.
 - Use unit as frequently as tolerated x 14 days
 - If braced* - Loosen brace to avoid added pressure

EXERCISE

- NO Shoulder motion until after your first post-operative visit unless otherwise instructed.
- No elbow active motion. You may use your non operative side hand to passively move elbow joint.
- You may begin wrist and hand range of motion on the first post-operative day about 2-3 times per day
- Formal physical therapy (PT) will begin after your first post-operative visit

****Emergencies****

- Contact Dr. Haro or Nicole Fava PA-C at (843) 654-8868 or by email HaroPA@southeasternspine.com if any of the following are present:
 - Painful swelling or numbness
 - 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 wrist, hand or lower extremity
 - Continuous drainage or bleeding from incision (a small amount of drainage is expected)

- Difficulty breathing
- Excessive nausea/vomiting

- **If you have an emergency after office hours or on the weekend, call (843) 654-8868 and you will be connected to our on call service. Do NOT call East Cooper Hospital or the Surgery Center.
- **If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

Follow-Up Care/Questions

- Nicole Fava, PA-C (Dr. Haro's Physician Assistant) will call you on your first day after surgery to address any questions or concerns. If you have not been contacted within 48 hours of surgery, please email HaroPA@southeasternspine.com or call (843) 654-8868
- If you have additional questions that arise at any time, whether for Dr. Haro or Nicole, please send an email to HaroPA@southeasternspine.com or call (843) 654-8868.
- If you do not already have a postoperative appointment scheduled, please contact the scheduling office during normal office hours.