
Steven S. Goldberg, MD

Orthopaedic Surgery and Sports Medicine

6376 Pine Ridge Road, Suite 430 Naples FL 34119

www.naplesorthopedic.com

Phone

239-316-7600

Fax

239-316-7509

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Pre-Operative Instructions – Arthroscopic Shoulder Surgery

My goal is to make your surgery experience comfortable and with as little confusion as possible. Call if you have questions before or after surgery. Much of this information came from feedback of hundreds of patients who have been through this experience before you. I always welcome your suggestions for improvements. -SG

Pre-Op Check List:

- Read this entire sheet before you have surgery!
- Please fill your pain medicine prescription before surgery.
- Purchase pre-surgical wash and use as directed – see attached sheet for instructions.
- Follow-up appointment scheduled within 10 days after surgery.
- Your 1st Physical Therapy appointment scheduled within 14 days after surgery; unless told otherwise. Our office will give you a therapy prescription and suggest locations **but you must call and schedule the appointment yourself.**
- A preoperative medical clearance visit with your primary physician.
- Someone must drive you from the hospital and stay with you for at least the first night.
- Bring your insurance cards and a list of medications the day of surgery. Do not bring valuables.
- Nothing to eat or drink after midnight the night before surgery.
- Unless instructed otherwise take your usual morning medications the day of surgery with a small sip of **water** (Not coffee, not juice, not milk!). Do not take Aspirin, Plavix, Coumadin, Xarelto, Eliquis, or Pradaxa.
- Our office will call you a few days before the surgery and tell you what time to arrive.
- In most cases, you should refrain from driving for 4-6 weeks, unless specifically instructed by Dr. Goldberg. Be prepared for this.

Surgery Day:

- You will be asked to arrive 2 hours before the scheduled surgery time (remember not to eat or drink anything after midnight or the following morning)
- You will be admitted and meet the nursing and anesthesia staff, and myself and/or my PA or nurse practitioner. We will most likely examine you in the pre-op holding area.
- You will usually have your regional anesthetic placed in the pre-op area.
- Your surgery will be performed and usually lasts 1 ½ - 3 hours
- You will stay in the recovery room typically 1-2 hours depending on the duration of the regional anesthetic and then will be transferred to the Orthopedic In-Patient Service.

Post-Operative Instructions – Arthroscopic Shoulder Surgery

About your sling: Nobody likes wearing a sling. However, it must be used to control the motion of your arm. The sling keeps you from actively contracting the muscles around the shoulder, which protects you and the surgical repair. When the sling is off you are more likely to instinctively reach, or raise the arm without thinking, and this can reinjure the shoulder.

Post-operative Day 1

- Your arm will be very swollen immediately after surgery because the shoulder is filled with water to perform the surgery. Do not be alarmed.
- Your bandage may leak fluid and may have a pink color because it is mixed with blood. This is normal.
- Take your pain medicine as soon as you feel sensation returning to your arm. Then take one more 4 hours later, and every 4 hours for the first day. Do not wait until the pain is unbearable or it will stay unbearable for a while.
- Place ice or frozen peas over the shoulder for 20 minutes at a time as frequently as every 2 hours.
- You will probably be more comfortable sleeping upright in a Lazy-Boy type chair or upright on pillows the first several days. Place a pillow or rolled towel behind your elbow to prop the arm up for comfort.
- Keep a gauze or dry towel in the armpit for the first 3 days to absorb moisture.
- You may shower any time after the surgery but you should keep the bandage on and the affected arm away from the stream of water. After 72 hours, you can directly wash the shoulder using soap and water. Place band aids over the incisions.
- If the dressing is completely soaked you may remove the dressing sooner and cover with dry gauze or band aids.

- The day after your surgery, begin the pendulum exercises.



- Holding onto a table, lean forward and dangle your operated arm until your fingers are about 6-12 inches from the floor.
- Make **small, slow** circles with your arm, 10 clockwise and 10 counter-clockwise.
- This may be difficult at first but will make the arm feel better once it loosens up.
- Repeat 4-6 times a day.

Post-operative Day 2-10

- The stitches will be removed in Dr. Goldberg's office at your first follow-up appointment.
- Your first physical therapy appointment should be within 14 days after surgery.
- After a few days, some people feel comfortable enough during the daytime to take just Tylenol (325 mg every 4 hours) or even nothing at all. Many people still use the prescription medication at night and before therapy sessions for several weeks after surgery.
- If the pain medication causes nausea and vomiting, if the pain is severe beyond expectation, if the incisions become red or if you have a fever above 102.0 degrees, call 239-348-4253

If Dr. Goldberg REPAIRED your ROTATOR CUFF tendons

- You should not drive for 4-6 weeks after surgery
- You may return to sedentary or desk work in 1-2 weeks. You may not return to heavy work or work that requires lifting for 12 weeks.
- Your sling should be worn for 4 weeks (and at night, preferably), and then only when out of the house for 2 more weeks.
- When you are sitting in a chair and resting, you may remove the sling and let the arm rest in your lap for comfort. As soon as you get up, the sling must be put back on.
- You **may** use arm for activities from the **mouth down** (eating, brushing teeth, typing, computer) while keeping the elbow at your side.
- You **may not** use arm for activities from the **ear up** (holding telephone, combing hair, reaching up) until 6 weeks postop.

If Dr. Goldberg DID NOT repair your rotator cuff (i.e. just removed bone spur):

- You should not drive for 1 week after surgery and you feel safe operating a vehicle.
- You may return to sedentary or desk work in 1 week. You may not return to heavy work or work that requires lifting for 6 weeks.
- When you are sitting in a chair and resting, you may remove the sling and let the arm rest in your lap for comfort. Your sling should be worn until your first follow-up visit, then only when out of the house for 1-2 more weeks.
- You **may** use arm for activities from the **ear up** (holding telephone, combing hair, reaching up) as soon as you feel comfortable.

If Dr. Goldberg Performed a SLAP or LABRUM REPAIR:

- You should not drive for 4 weeks after surgery and you feel safe operating a vehicle.
- You may return to sedentary or desk work in 1 week. You may not return to heavy work or work that requires lifting for 12 weeks.
- Your sling should be worn for 4 weeks, then only when out of the house for 2 more weeks.
- You **may** use arm for activities from the **mouth down** (eating, brushing teeth, typing, computer) while keeping the elbow at your side.
- You **may not** use arm for activities from the **ear up** (holding telephone, combing hair, reaching up) until 3 weeks postop.

FREQUENTLY ASKED QUESTIONS (FAQ)

- **When can I remove the sling?**

You can take the sling off, when seated, for showering, and to do your elbow, wrist and finger exercises on post op day 1. However, you must wear your sling in public and at night for sleeping for the first 4-6 weeks.

- **When can I begin to drive?**

Typically, you will be able to resume driving when your sling comes off in 4-6 weeks.

- **When can I return to work?**

This really depends on the individual patient specifically with respect to job demands (labor versus a desk job). Some patients return to desk work as soon as 4-7 days post-operatively and others may require 3 months away from work if “limited duty” is not available.

- **How long will I have physical therapy after the surgery?**

The typical therapy program will be 2-3 months. The 1st phase of the therapy will be designed to safely regain range of motion while the 2nd phase of therapy will be directed at regaining function, strength, and endurance.

- **How much pain will I have?**

This is variable but we will do our best to provide you with an appropriate amount of pain medication to keep you comfortable. Remember, that most of our patients have regional

anesthesia and it is not unusual to have numbness and tingling that can be present for several days following your surgery.

- **When should I call the office with concerns?**

Any signs of infection should be reported immediately – these include increased drainage (usually thick, cloudy, redness, increased warmth, and fevers with temperatures over 101.8.

- **Will I need antibiotics prior to dental work in the future?**

Yes, it is recommended that patients who undergo a total joint replacement use an antibiotic, such as 2 grams of Amoxicillin 1 hour to dental procedures for at least 2 years after the replacement, maybe longer depending on your physician's preference.