



Shoulder Arthroscopy Discharge Instructions

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WOUND CARE

- Keep dressing clean, dry and in place for 2 days.
- On the second day, you may change the dressing and shower. Don't let water run over your shoulder incisions for one week. Leave steri-strips in place. **DO NOT** soak wound in bathtub, hot tub or swimming pool for two weeks after surgery. Redress any draining areas, if present.

ACTIVITIES/EXERCISES

- If you had a nerve block, you should wear the sling until your arm is **NOT NUMB** and bicep muscle is strong. Then you may remove lower arm from sling several times a day and move your elbow as tolerated.
- You may be fitted with a special sling that will position your arm in a specific way to facilitate proper healing.
- Your doctor may schedule you for physical therapy, if indicated. Your therapist will inform you of how long you are to wear the sling, if it has not been made clear before you are discharged.

DIET AND COMFORT

- Advance diet as tolerated. Drink extra fluids to avoid constipation.
- Use the cold therapy system as much as possible for the first 2 weeks, then as needed. Avoid frostbite from the cooling system after the dressing is removed by placing cloth of clothing between the cool therapy and your skin. If you have a rental unit, return the cooling unit to the office at the time of your follow up appointment. **Keep the cooling pad.**

NOTIFY YOUR DOCTOR FOR: (616.738.4420)

- Unusual chest or leg pain.
- Chills or fever over 101 degrees.
- Persistent nausea/vomiting lasting more than 24 hours.
- Signs of infections, such as redness, swelling, white, yellow, or green drainage from incision.
- Other questions or concerns.

MEDICATIONS

- Resume preoperative medications.
- Use pain pills as prescribed. Most pain medication contains Tylenol. Check with your pharmacist so you don't exceed the recommended amount of Tylenol in 24 hours. Call during business hours if a refill is required. **DO NOT** drive, operate machinery, or drink alcohol for the first 24 hours after surgery and while taking pain pills.

FOLLOW-UP APPOINTMENT

- Keep scheduled follow-up appointment: PT: _____ Office: _____
- Phone (616) 738.4420 to verify appointment, or if you have any concerns.

ADDITIONAL SPECIFIC INSTRUCTIONS

- If you do not urinate in 12 hours, go to the nearest hospital.
- Have a responsible adult with you for the next 24 hours.
- Other _____

I have read, understand, and received a copy of the discharge instructions.

Patient Signature