

POSTOPERATIVE INSTRUCTIONS SHOULDER – ADHESIVE CAPSULITIS

PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION IF NECESSARY -
DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE HOSPITAL
OR VIA PHONE/EMAIL TO DR GRIFFIN'S STAFF AFTER ARRIVING HOME

DIET

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

WOUND CARE & BATHING

- BANDAGE
 - You have a large, bulky bandage on your shoulder that you may remove **2 days** after your surgery. Simply peel off all of the tape and underlying gauze.
 - After the dressing is removed, you will see that the incision is reinforced with white adhesive bandages called Steri-Strips – leave these on until your sutures are removed
 - Cover the incision with a new bandage once daily – a large adhesive bandage or gauze and tape will be sufficient.
 - Keep the incision clean and dry – do not put any alcohol, lotion, or ointment on the incision.
- BATHING
 - You can shower once the initial dressing is removed (2 days post-op). However, the incision needs to stay dry and covered in the shower until the sutures are removed at 7-14 days post-op. Waterproof bandages work very well for this
 - To wash under your arm, bend forward and allow your arm to hang straight to the ground. You should not attempt to lift your arm overhead to wash under your arm.
 - Do not submerge the incisions in a bath, pool, or hot tub until the sutures are removed **and** the wound is healed.

MEDICATIONS

- **Pain medication** is injected into the wound and knee joint during surgery – this will wear off within 8-12 hours. It is recommended to begin the prescription pain medication provided to you upon arriving home, and continue as frequent as every 4 hours for the first 1-2 days after surgery.
- If you are having problems with **nausea and vomiting**, contact the office to possibly have your pain medication changed or something additional prescribed for nausea. Common side effects of the pain medication include nausea, drowsiness, and constipation-to decrease these, take medication with food. If **constipation** occurs, consider taking an over-the-counter stool softener such as Dulcolax or Colace.
- Do not drive a car or operate machinery while taking the narcotic medication.
- Unless you have previously been instructed to avoid **aspirin** products for other medical reasons, **please take one (1) adult 325 mg enteric coated aspirin once daily for 28 days** following surgery. This is to help minimize the risk of blood clot (extremely rare). As long as you have no personal history of adverse response to **anti-inflammatories**, use an over-the-counter anti-inflammatory such as Ibuprofen (i.e. Advil/Motrin) 600-800 mg as frequent as every 8 hours with food to help swelling and pain in addition to the prescribed pain medication.
- The anti-inflammatory may be taken in addition to 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.

ICE THERAPY

- Begin immediately after surgery - for the first 2-3 days following surgery. Ice at your discretion thereafter. When using ice, avoid direct skin contact for more than 20 minutes to prevent damage/frostbite of skin. Check the skin frequently for excessive redness, blistering or other signs of frostbite.

ACTIVITY

- 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. Griffin's office to discuss whether anticoagulation (medication to prevent blood clot) is necessary

EXERCISE

- Begin exercises 3x daily starting the day after surgery as directed by the therapist to maintain motion. If the exercises cause increased pain, stop and try again later.
- Avoid movement of the arm against gravity or away from the body
- **Formal physical therapy (PT) will begin immediately the day after surgery.**

****EMERGENCIES****

- Contact Dr. Griffin's practice hotline at 757-490-4802 if any of the following are present:
 - Painful swelling or numbness that progressively worsens
 - 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 that worsens
 - Continuous drainage or bleeding from incision (a small amount of drainage is expected)
 - Difficulty breathing
 - Excessive nausea/vomiting

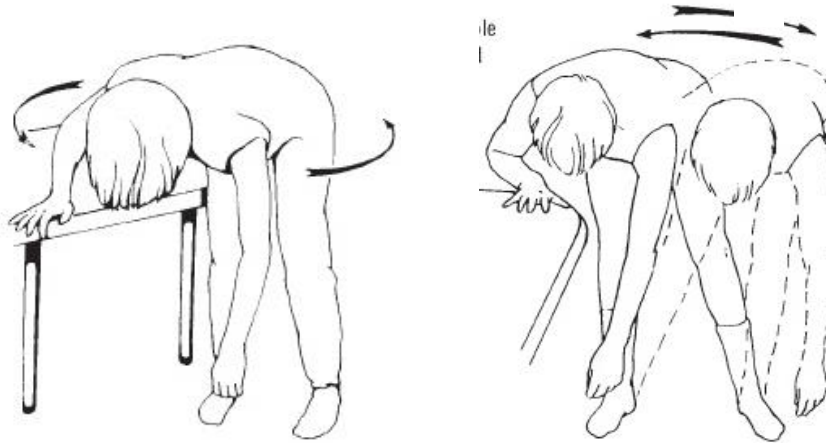
DO NOT CALL THE HOSPITAL OR SURGICENTER FOR EMERGENCIES
IF YOU HAVE A NEED THAT REQUIRES IMMEDIATE ATTENTION, PROCEED TO THE NEAREST
EMERGENCY ROOM

FOLLOW-UP CARE/QUESTIONS

- Someone from Dr. Griffin's team 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 call 757-490-4802.
- Email any non-emergent questions to jgriffin@jordan-younginstitute.com for the fastest reply. If e-mail is not an option please call the practice at 757-502-8584.
- If you do not already have a postoperative appointment scheduled, please contact the scheduler during normal office hours at 757-502-8563 to arrange an appointment approximately 14 days from surgery.

You may begin the home exercises listed below **tomorrow**.
You can remove your sling to perform these exercises.

- **PENDULUM EXERCISES** (10-15 repetitions per set | 2 sets | 3 times daily)
 - Bend forward at the waist using a table for support. Rock body in a circular pattern to move arm clockwise 10-15 times per set. Do 2 sets 3 times per day. Repeat rocking body from side to side and let arm swing freely.



- **ELBOW MOTION** (10-15 repetitions per set | 2 sets | 3 times daily)
 - Remove sling and allow arm to rest at your side (you may perform this sitting or standing). Allow your arm to straighten at the side, then gently bend elbow up. Position forearm with thumb facing up.



- **HAND AND WRIST EXERCISES** (10-15 repetitions per set | 2 sets | 3 times daily)
 - With your arm comfortably supported, gently bend wrist back and forth.
 - Curl the fingers into the palm to make a loose fist and then straighten them out.

