# <u>Sumner E. Karas, M.D. /Arthroscopic Rotator cuff Repair POST-OP</u> Instructions

# **SURGERY**

Your surgery will be performed entirely through 3 or 4 small incisions around your shoulder. Through these incisions, using a small viewing instrument called an arthroscope, Dr. Karas will remove bone spurs and other abnormal tissue from your shoulder. He will also repair the torn tendon as warranted. The details of your particular surgery will be discussed with you during your first postoperative visit and with family members immediately after surgery. At the time of your first post-op visit Dr. Karas will review the photographs that will be taken at the time of your surgery.

# **DRESSING**

During surgery, fluid is continuously flowing through the shoulder to aid in visualization. As a result, it is normal to see blood stained fluid leaking through the dressings for the first 24-48 hours after surgery. If the dressing becomes stained after you arrive home, simply remove it and replace it with sterile bandages, which may be purchased at any pharmacy. Two days after surgery, if there is no more drainage, you may take the bandage off and cover each incision with a clean band-aid. It is normal for your shoulder to be swollen for several days after surgery. It is also normal to see a good deal of discoloration around your shoulder, arm and chest after surgery. If there are any signs of infection, such as redness or if you have a fever greater than 101, call our office immediately.

#### **PAIN**

At the time of your pre-operative visit, you will be given a prescription for pain medication, usually Percocet and/or Oxycontin. Most patients require these medications for 4-7 days after surgery. These narcotic medications should be taken only as needed for pain control, and should be stopped when non-narcotic medicines are adequate to control your pain. These medications may cause drowsiness; therefore, you may **not** operate a motor vehicle while taking these medications. You may also experience constipation; therefore, drink a lot of fluids and eat fiber. Many patients benefit from taking anti-inflammatory medicine such as, Aleve or Motrin, along with the narcotic medications. Use of crushed ice in <u>double</u> plastic bags can greatly reduce pain and swelling for the first 72 hours after surgery.

### **BATHING**

You may not shower until 4-5 days after surgery, until then you may sponge bathe, but do not get the incisions wet for 4-5 days. You should not soak your shoulder in a swimming pool, bathtub, or whirlpool until **AT LEAST 14 DAYS AFTER SURGERY.** When you get in the shower 5 days post-op, let the water run over the incision. Remember not to soak or scrub the incisions. Avoid putting any ointment, lotions, etc on the incisions. Pat the area dry and place band-aids on the incisions.

<u>SLING</u>
You will remain in your sling for approximately 1 month. Most of the time you will remain in your sling; but you may remove the sling to dangle your arm for brief periods and for axillary hygiene. When your arm is out of the sling you may move your elbow, so long as your elbow stays by your side. Do not try to lift your arm away from your body. Bend forward and let gravity take your arm away from your body to gain access to your axilla.

# **ACTIVITY**

You should keep your hand moving (with the exercise ball), but you should not be doing any other activities with your operative limb. You should be cautious and err toward doing less. Driving is not recommended until you've been out of your sling, approximately 1 week and are no longer taking narcotic pain medication.

# PHYSICAL THERAPY

Dr. Karas will make arrangements for you to start physical therapy when he sees you at your first post operative appointment. The nature of your physical therapy is dependent upon the findings and the nature of your surgical procedure. Your physical therapy will be customized for you.