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Reverse Total Shoulder Replacement Post-Operative Patient Instructions

Incision Care

Unless you are instructed by Dr. Patel, do not remove your dressing. Your dressing will be changed at your first post-op office visit.

If you have excessive draining or redness around the dressing, please contact the office. If any health care provider considers starting you on antibiotics for redness or drainage around your incision, please contact the office before starting the antibiotics.

You may shower if steady and safe to do so. If not safe, please sponge bath only. Your dressing may get wet with running water. Do not submerge the surgical site and dressing under water. After shower please pat dry

Do not submerge surgical site until fully healed (NO baths, pools, or Jacuzzis) – until you get clearance to do so from the doctor.

Sling

IT IS IMPORTANT YOU KEEP YOUR SLING WITH THE PILLOW ON AT ALL TIMES! You must sleep with on for the first 4-6 weeks. You may remove the sling to do preapproved range of motion exercises, physical therapy, shower. After you are seen by Dr. Patel at the 6 week mark, he will instruct you to discontinue the sling.

Shoulder Precautions

For the first 12 weeks after your surgery, you must follow certain precautions to protect the shoulder after surgery and to avoid dislocating your new shoulder replacement.

Please make sure of the following:

- Avoid shoulder extension beyond neutral (make sure your elbow does not go, behind, past your body).
- While you are laying down, you should always be able to see your elbow. Use the sling with the pillow to ensure this.
- Avoid any of combination of shoulder adduction (arm going across your body), extension, and internal rotation.
- No shoulder active shoulder range of motion (do not move your shoulder on your own).
- No lifting post-operatively with the operative upper extremity
- No supporting of body weight with operative upper extremity (i.e., do not use arm on chair when transitioning in sit to stand)

Ice

You should place an ice pack over the anterior (front) of the operative shoulder 3-5 times a day for 20-30 minutes at a time. You may use an ice pack more frequently if you like. Using ice is most important during the first 2 weeks from surgery.

Pain relief

It is normal to have some pain after surgery. Pain medications have been prescribed and enough pain pills have been given to cover you beyond your next office visit. It should be noted that pain medications take about one-half hour to start working, so take them prior to the pain becoming severe. DO NOT drink alcohol while taking prescribed pain medication. It is dangerous and illegal to drive while taking pain medicine. If you need a refill on pain medication before your first scheduled appointment, please call our office during regular office hours. Please provide at least 3-day notice as to when you will be running out of narcotic pain medication

Please note that you must come into the office to pick up a prescription as the pharmacies will not accept a prescription for narcotics from a physician over the phone.

DVT (Blood Clot) prophylaxis

You will be prescribed a medication to lower your risk of forming blood clots. This medication is important to take until the prescription is finished. Depending on your risk factors for blood clots and prior medical history, these may include Enteric Coated Aspirin, Eliquis, Xarelto, or Lovenox. You will be given instructions and a prescription on which blood thinner you will be taking prior to discharge. In addition, being active and performing your exercises properly can minimize your risk.

If you experience the following signs of DVT (blood clot), please call our office:

- Severe and constant calf tenderness
- Redness/warmth to calf
- Shortness of breath
- Fever –101° Fahrenheit or greater

Activity

For the first few weeks after surgery, you should get up and walk around your home for 2-5 minutes every 1-2 hours. It is important that you closely follow the directions and restrictions from Dr. Patel and your physical therapist in the early on after surgery. After the initial post-operative phase, we will gradually progress your activities.

Driving

You may not drive until Dr. Patel clears you to drive depending on your progression. It can take up to 2-3 months before you are allowed to drive.

Diet

Typically, with adequate protein intake for promotion of healing, there are no special diet restrictions. Make sure you eat a well-balanced meal, drink plenty of fluids and incorporate fiber into your diet as oral pain medications have a tendency to cause constipation. It is also a good idea to take a stool softener such as Colace daily until your system becomes regular after surgery. If you are prescribed Coumadin, you will be given a separate handout on Coumadin and avoiding foods high in Vitamin K (which can inhibit the Coumadin from working effectively).

Physical Therapy

This may not apply to all patients:

It is your responsibility to find an outpatient physical therapy center that takes your insurance and can schedule you promptly after your surgery. You should have been given a prescription for outpatient physical therapy prior to surgery, please bring that prescription to the outpatient therapy center of your choice as soon as possible because there may be a waitlist for appointments.

Atlanta Orthopedic Institute has two outpatient physical therapy centers right across from our offices in Buckhead and Stockbridge; we can help you set up an appointment for the day after your surgery.

You will also be given printed instructions by Dr. Patel to give to your physical therapist to make sure that they do not do anything that can injure your new shoulder.

Dental work after joint replacement

Artificial joints can become infected after simple procedures such as dental cleaning. Preventative treatment is extremely important and should be followed prior to receiving any dental treatment. Please call us, or your dentist ahead of time so that an antibiotic can be prescribed before you have your dental work done. **YOU SHOULD NOT HAVE ANY DENTAL WORK PERFORMED 30 DAYS PRIOR TO YOUR JOINT REPLACEMENT. YOU SHOULD NOT HAVE ELECTIVE DENTAL WORK PERFORMED FOR 3 MONTHS FOLLOWING YOUR JOINT REPLACEMENT DUE TO THE INCREASED RISK FOR INFECTION.** If a dental crisis occurs within this time period, please call our office for instructions.

Post-operative office appointment

Your first postoperative visit will be approximately 10-14 days after the surgery. You will then be seen again at 6 weeks, 12 weeks, 6 months, and then 1 year after surgery. For those that live out of town the typical schedule is 6 weeks, 4 months and 1 year after surgery. Your first post-operative visit should be set prior to your surgery.

Post-operative X-rays

You will typically get X-rays at your office visits to evaluate the hip replacement components for wear, loosening and other possible abnormalities.

Call the office (404) 352-4779 if you notice any of the following:

- Fever above 101° Fahrenheit
- Persistent swelling, redness, or uncontrolled pain in the surgical area
- Persistent bleeding or drainage from the wound
- Severe calf pain or tenderness
- You are unable to do the exercises

Call 911 if you have a sudden crisis such as symptoms of a heart attack, stroke, dizziness or confusion, or chest discomfort or pain.

If you have any questions and concerns about any discharge instructions, recovery process, and rehab please contact Jessica at (404) 352-4779.