
POST-OPERATIVE INSTRUCTIONS

1. Precautions

- For the first 24 hours after the anaesthetic:
 - Be in the care of a responsible adult.
 - Do not drive or operate machinery.
 - Do not take sleeping pills or other medication that may cause drowsiness.
 - Do not drink alcohol.

2. Urgent Problems

- Please call the office at **(613) 549-6666 x6597** (during office hours) or have the orthopedic surgery resident on call paged at **(613) 548-3232** (after office hours) if you have any concerns.
- In the event of an emergency, or if the following problems occur, you should return to the nearest Urgent Care Clinic or Emergency Department:
 - Fever
 - Shortness of breath
 - Persistent vomiting
 - Chest pain
 - Bleeding
 - Uncontrolled pain

3. Activity

- It is normal for your shoulder/elbow to be painful for up to 6 weeks after surgery. Elevate your upper body on pillows or sitting position for resting and sleeping for first 24 hours, or as long as required for comfort. This position may be most comfortable for sleeping for several weeks.
- Please use the shoulder immobilizer as directed by your surgeon.
- Return to work depends on your type of employment and rehabilitation limitations.
- You are able to drive when you feel comfortable to do so.

4. Physiotherapy

- Generally, you will be given a physiotherapy referral and rehabilitation protocol on the day of your surgery. Physiotherapy should begin **IMMEDIATELY** following your surgery and should **NOT** wait until your first follow-up visit with your surgeon. Please note that **you** are responsible for arranging your own physiotherapy appointment.
- If you were not given a physiotherapy referral and rehabilitation protocol, this is not a mistake, and you should **NOT** do any physiotherapy until your first follow-up visit.
- Physiotherapy is a vital part of your shoulder and elbow repair. Do your exercises at least 4 times a day each day. If you misplace your rehabilitation protocol sheet or have any questions, please contact us as soon as possible. Please note that the rehabilitation protocol is meant to be information for the **PHYSIOTHERAPIST** – it is not meant to be instructions for **YOU** to follow, as most of it will **NOT** be self-explanatory.

5. Wound Care

- A small amount of drainage from your incision(s) is normal. Leave all dressings intact for 3 days. Change the bulky outer dressing on Day 3. Steri-strips, if present, should be left in place. If these have not fallen off by Day 10, then you can remove these. You should keep the incision covered with a clean, dry, and sterile dressing until your 2-week follow-up visit.
- You may shower after Day 3, but will need to cover your incision site to keep it dry. It is important that you keep your incision site as dry as possible until your 2-week follow-up visit.
- **DO NOT SOAK YOUR INCISION.** No baths or swimming until your 2-week follow-up visit.

- Allow your armpit area a chance to air out. If you frequently keep your arm at your side, place a dry hand towel in your armpit to help prevent a yeast infection.
- If you have stitches or staples, they will be removed at your 2 weeks post-op follow-up visit. You should wait 24 hours before showering after this is done.

6. Medications

- Ice packs (applied every 15–20 min) will help decrease pain and swelling.
- It is also recommended to use a cooling device post-operatively. This should have been arranged by our office before surgery.
- Pain medications have been prescribed. Please take as directed. Do not combine with alcohol.
- Normally, we expect that you will no longer require your pain medication 6 weeks following your surgery. If you require a renewal of pain medications, please contact our office if prior to 6 weeks. If more than 6 weeks after surgery, please contact your family physician for on-going pain medication needs.
- DO NOT take any NSAIDS (anti-inflammatory medications) such as ibuprofen, aspirin, and/or Celebrex for 6 weeks after your surgery. These drugs may slow bone growth and tissue healing. If you were taking aspirin before your surgery for cardiac reasons, it is OK to resume this. You may also take Tylenol.

7. Smoking

- Stop smoking before, during, and for at least 3 months after your surgery. Smoking slows bone and tissue healing and can significantly affect the result of your surgery. Talk to your family physician or pharmacist about resources to help you quit smoking.

8. Follow-up Care

- Follow-up will be organized on the following approximate schedule:
 - i. 2-3 weeks – wound check.
 - ii. 6-12 weeks – assess rehabilitation, possible x-ray (depending on procedure).
 - iii. 1 year – final follow-up.

9. Other Instructions

Physician Signature

Physician Name

Date