
PRE-OPERATIVE INSTRUCTIONS

1. Registration

- Registration takes place at the Hotel Dieu Hospital Central Registration desk located beside the Brock 1 clinic desk.

2. Pre-surgical Screening (Hotel Dieu Hospital - Brock 1)

- Pre-surgical Screening (PSS) will contact you by telephone.
- A nursing assessment will be done, please bring **ALL** your medications.
- Blood work, other investigations and consultations with anaesthesia, physiotherapy, pharmacy or other departments may or may not be required. These will be arranged by the PSS.

3. Pre-admission History and Physical Examination

- Please have your **Family Doctor** perform a pre-operative history and physical examination within 3 months of your OR date. Have the "History and Physical" forms filled out, and fax it to the number on the bottom of the sheet (613-544-6751). Please also bring the original copy of this form on the date of surgery.

4. 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 about resources to help you quit smoking.

5. Medications That May Cause Bleeding

- One week before surgery, you will need to stop taking any medications that may increase bleeding during surgery. These include most anti-inflammatory medications, such as Aspirin, Ibuprofen or Naproxen. Please contact our office if you are taking an anti-coagulant or anti-platelet medication, such as Coumadin, Heparin, Enoxaparin or Plavix.

6. Health Changes

- You need to be in good health on the day of your surgery. Please call our office if you develop any health problems. This includes an upper respiratory infection, a urinary tract infection, an infection in any other part of your body (including mouth or teeth) or any major change in health.

7. Physiotherapy

- Physiotherapy is an **extremely important** part of your post-operative treatment.
- You will be provided with a physiotherapy referral and post-operative rehabilitation protocol at the time of your surgery.
- Prehab: It can be very beneficial to do some pre-operative physiotherapy to stretch and strengthen your shoulder prior to the operation. A more mobile and stronger shoulder going into surgery will make it easier to regain motion and strength after surgery.
- Rehab: Please arrange for your post-operative physiotherapy appointment **BEFORE** you have surgery to ensure it can start in a timely fashion). Unless your **SURGEON** tells you otherwise, 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.

8. Equipment

- Shoulder Immobilizer/sling: This will be provided and generally should be worn **at all times** in the early period of your rehabilitation. You will be informed when it can be discontinued.
 - i. Ice Packs: These are applied to the shoulder postoperatively to control pain and swelling. They can be applied for 15 minutes and should be replaced every 2 hours. Please do not place the ice packs directly on skin as this can cause frostbite.

9. Night Before Surgery

- Please do not have **ANYTHING** to **eat or drink** after midnight the night before your OR date.
- Hair removal from the surgical area should not be done prior to surgery. If necessary, this will be done immediately prior to surgery in the OR.
- The hospital will call you the day/evening before your OR date to inform you exactly when and where to present for your surgery.

10. Day of Surgery

- Please make sure that you arrive at the appropriate place, **on time** (or preferably earlier). If you are late, your operation **may** be cancelled.
- Please bring your **“History and Physical”** form which was filled out by your Family Doctor. Please bring a written list of your **medications and allergies**.
- Please do **not** have **ANYTHING** to **eat or drink** the morning of your surgery.
- You can take your necessary medication with a **sip** of water, if required.

11. Discharge After Surgery

- You **MUST** have someone drive you home.
- You will be given **Postoperative Instructions** to guide you on diet, activity, wound care, etc.
- You will be given prescriptions for **pain medications**, which may include:
 - i. Tylenol #3 or Percocet for intermittent pain.
 - ii. Oxyneo for long acting pain relief for only a few days.
- You will usually be given a referral for **Physiotherapy** to be started as directed (usually immediately). If your surgery was a revision procedure or complicated, you may not be given a referral for physiotherapy until your first postoperative follow-up visit.

12. Follow-up

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

13. Further Information

- If you have any questions, call our office at (613) 549-6666 x6597 or email at dowlingl@kgh.kari.net
- More information is available from:
 - The Canadian Orthopaedic Foundation – www.canorth.org
 - The American Academy of Orthopedic Surgeons at <http://orthoinfo.aaos.org/>.
 - Orthoillustrated – www.orthoillustrated.com