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MIDWEST ORTHOPAEDICS AT RUSH

POSTOPERATIVE INSTRUCTIONS
ROTATOR CUFF REPAIR

****Please note that the instructions provided below are general guidelines to be followed; however, any written or verbal instructions provided by Dr. Verma or either Physician Assistant supersede the instructions below and should be followed.**

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

WOUND CARE
- Maintain your operative dressing, loosen bandage if swelling of the hand occurs
- It is normal for the shoulder to bleed and swell following surgery. If blood soaks through the bandage, do not become alarmed, reinforce with additional dressing
- Remove surgical dressing on the **third post-operative day** – if minimal drainage is present, apply band-aids or a clean dressing over incisions and change daily. If an open biceps tenodesis was performed, then you should wait to get your wound wet until the dressing is removed at the first post op visit.
- To avoid infection, keep surgical incisions clean and dry – you may shower by placing a plastic covering over the surgical site beginning the day after surgery.
- NO immersion in a bath until given approval by our office.
- *If you are told by the team that you have a "sylke dressing" or piece of white tape over the incisions, then the surgical dressing may be removed on post op day 3. The white tape may get wet in the shower beginning post op day 3. Please keep the white tape on and we will remove it at the post op visit. If you are unsure about the dressing, please contact the team to confirm.*

MEDICATIONS
- Local anesthetics are injected into the wound and shoulder joint at the time of surgery. This will wear off within 8-12 hours and it is not uncommon for patients to encounter more pain on the first or second day after surgery when swelling peaks.
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle.
- Common side effects of the pain medication are nausea, drowsiness, and constipation. To decrease the side effects take the medication with food. If constipation occurs, consider taking an over the counter laxative.

- If you are having problems with nausea and vomiting, contact the office to possibly have your medications changed.
- Do not drive a car or operate machinery while taking the narcotic medication or while in sling
- If you are having pain that is not being controlled by the pain medication prescribed, you may take an over the counter anti-inflammatory medication such as ibuprofen in between doses of pain medication. This will help to decrease pain and decrease the amount of narcotic medication required. Please take as directed on the bottle. Please do not take additional Tylenol or Acetaminophen because the prescribed pain medication contains acetaminophen.
- For 2 weeks following surgery take a baby 81mg aspirin twice daily to lower the risk of developing a blood clot after surgery. Please contact the office should severe distal arm pain occur or significant swelling of the distal arm and/or hand occur.

ACTIVITY
- You are to wear the sling placed at surgery for a total of 4-6 weeks as described by Dr. Verma. This includes sleeping and throughout the day.
- If there are 24 hours a day, you should be in the sling 23.5 hours of the day. Removal for hygiene, dressing, and home exercise only
- When sleeping or resting, inclined positions (ie: reclining chair) and a pillow under the forearm while still in sling may provide better comfort.
- Do not engage in activities which increase pain/swelling. Unless otherwise instructed the arm should remain in the sling at all times.
- Avoid long periods of sitting or long distance traveling for 2 weeks.
- NO driving until instructed otherwise by physician, it is illegal to drive in a sling
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable

IMMOBILIZER (if prescribed)
- Your sling with supporting pillow should be worn at all times (except for hygiene).
- Keep your elbow against the pillow and in front of your body at all times to minimize stress on the repair.
- Keep a pillow behind the elbow when lying down to prevent the elbow from sliding backwards.

ICE THERAPY
- Icing is very important in the initial post-operative period and should begin immediately after surgery.
- Use icing machine continuously or ice packs (if machine not prescribed) until your first post-operative visit.
- Care should be taken with icing to avoid frostbite to the skin.

EXERCISE
- Begin exercises (pendulums and active flexion/extension at the elbow without resistance) 24 hours after surgery unless otherwise instructed.
- While maintaining your elbow by the side, begin elbow, hand, and wrist exercises immediately.
- Formal physical therapy (PT) typically begins after you are seen at your first post operative appointment around 2 weeks after surgery unless otherwise discussed. A prescription and protocol will be provided at your first post-op visit.

EMERGENCIES**
- Contact Dr. Verma's PA's at Vermapa@rushortho.com if any of the following are present:
    - Painful swelling or numbness (note that some swelling and numbness is normal)
    - 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
    - Color change in distal arm and/or hand
    - Continuous drainage or bleeding from incision (a small amount of drainage is expected)

- Difficulty breathing
- Excessive nausea/vomiting
- Calf pain

- The PAs are available by email during business hours (M-F 8 am – 5pm)
- If you have an emergency after office hours or on the weekend, contact the office at 312-432-2390 and you will be connected to our pager service. Press 0 and this will connect you with the Physician on call. You can also call Rush University Medical Center at 312-942-5000 and ask for the operator to page the orthopedic resident on call.
- If you have an emergency that requires immediate attention proceed to the nearest emergency room.

FOLLOW-UP CARE/QUESTIONS

- If you do not already have a post-operative appointment scheduled, please contact our scheduler at 708-236-2701 to schedule.
- Typically the first post-operative appointment is 7-10 days following surgery
- The first post operative appointment will be with one of the Physician Assistants. They will assess the wound, go over post operative protocol, and answer any questions you may have regarding the procedure
- If you have any further questions please contact the PAs directly at Vermapa@rushortho.com