

## **Arthroscopic Rotator Cuff Repair Helpful Hints & Important Precautions**

### **Diet:**

- You may resume clear liquids and light foods after surgery (jello, soup, etc.)
- Progress to your normal diet as tolerated as long as you are not nauseated.

### **Medications:**

- NSAID's must be stopped 7 days prior to surgery.
- No food/drinks after midnight prior to surgery.
- Before surgery, you will be offered a nerve block which helps greatly with pain control and decreases your need to take narcotic medications.
- In addition, during surgery I will often inject a numbing medicine like Novocain that will give some pain relief for several hours after surgery. It is important to begin taking your pills before this medicine wears off.
- The first medication I use is Percocet (Oxycodone/Tylenol) which is a strong narcotic pain medication. It will begin to work within 15 minutes after taking it with a maximal effect in 1 to 2 hours. Normally, Percocet is taken every 6 hours, but, if the pain is severe, it can be used every 4 hours.
- Common side effects of these medications are nausea, constipation, itching, and drowsiness.
- The best way to prevent nausea is to take the medicine with a little food, start with just one pill, and be patient while the medicine begins to work. Usually, after the first few doses, the nausea will go away. I also prescribe an anti-nausea medication called Zofran (Ondansetron) to be taken if you have persistent nausea after surgery.
- I strongly recommend you take an over-the-counter stool softener such as Colace or eat a homeopathic diet heavy in high fiber fruits such as prunes to avoid constipation.
- You will be given 24 hours of oral antibiotics. Take these with food. You will be told when to start these when you leave the surgery center, usually at dinner when you get home.
- Take Benadryl one-half hour before your narcotic if you are experiencing itching.
- After your stitches are removed, you will also be given a prescription for Naprosyn which is a strong anti-inflammatory medication. Take this twice a day with food in addition to the Percocet. Both medications will work synergistically in pain relief.
- Transition from Percocet to Tylenol as your pain subsides, but do not take Tylenol while you are taking Percocet as Percocet has 325 mg of Tylenol in each pill. Patients with normal liver function should not consume more than 4000 mg of Tylenol per day.
- You can also supplement your pain medication with NSAIDS (Aleve, Advil, etc).
- You may be required to take 325 mg of aspirin for 4 weeks.

### **Bandages and Sling:**

- Your postoperative dressing has two layers you need to understand in order to properly care for your surgery site. Your incisions were closed with stitches that are covered with

a bandage. Your stitches should be left in place until I see you at your first postoperative date.

- The second layer is a large white fluffy dressing and ABD dressings that are held in place with tape.
- Because the surgery is performed arthroscopically, occasionally there will be water with a small amount of blood on this dressing. This is nothing to worry about; however, if you see a lot of bleeding, please call Dr. Raphael. Unless directed otherwise, remove this dressing 2 days after surgery and place large band-aids over the stitches.

### **Washing & Sling:**

- You should be careful to keep the wound clean and dry for the first 48 hours after surgery.
- Beginning on the third day after surgery, it is okay to shower as long as the incisions are kept dry with plastic wrap. Remove the wrap after showering.
- Do not take a bath until 2 weeks after surgery and after the first postoperative visit.
- Do not go into a pool, lake, or ocean until 4 weeks after surgery.
- You will have a sling placed after surgery. The only time you are allowed to remove it is during showering.

### **Ice and Activity:**

- One important goal following surgery is to minimize swelling around your surgery site. The best way to achieve this is with the frequent application of ice. You may have an ice brace. This is most important in the first 48 hours following surgery. If you do not have an ice brace, then use an ice pack which should be large (like a big zip-lock bag or bag of peas) and held firmly to the area of your surgery. Apply for 15 minutes every hour while awake if possible. Look for signs of frost bite. Do not place the ice directly on your skin.
- Keep your elbow against the pillow and in front of the plane of the body to avoid stress on the repair.
- Keep a pillow behind the elbow while lying down to prevent the elbow from sliding backwards.
- While sitting in a chair, you may remove the sling three times a day to perform elbow and wrist ROM exercises.
- You may return to sedentary work only or school in 3-4 days after surgery if your pain is tolerable.
- Avoid driving unless otherwise instructed by Dr. Raphael.
- Avoid long-distance traveling in cars or by airplane during the first week after surgery to avoid increasing your risk of developing blood clots.

### **Sleeping:**

- Many patients have difficulty sleeping after shoulder surgery. You may find that sleeping in a slightly upright position (i.e. reclining chair) with a pillow under your forearm will be your most comfortable position. Make sure to have your pain under control before you sleep.

### **Physical Therapy:**

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Phone: (315)701-4024

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Liverpool, NY 13090

- The goal of physical therapy is to first assess how your body responded to the surgical procedure. They help you feel comfortable with your surgery and make sure you are not afraid to start doing things. Your therapist will start gentle range of motion exercises on your first visit. You will start physical therapy after your first postoperative visit.

**Followup appointment:**

- We try to give all of our patients a followup office visit at the same time we schedule your surgery.
- Typically I want to see my patients in the office 7-10 days after surgery.

**FOLLOWUP APPOINTMENT: Please call our office to confirm your scheduled appointment.**

**What to watch out for:**

- ❖ Pain that is increasing every hour in spite of the pain medication.
- ❖ Drainage from the wound more than 2 days after surgery.
- ❖ Increasing redness around the surgical site.
- ❖ Pain or swelling around your surgery
- ❖ Fever greater than 101.5 degrees.
- ❖ Unable to keep food or water down for more than a day.

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