

ARTHROSCOPIC CAPSULAR RELEASE POSTOPERATIVE INSTRUCTIONS

1. Diet

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

2. WOUND CARE

- Maintain your operative dressing, loosen bandage if swelling of the elbow, wrist, or 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 **2nd** post-operative day if minimal drainage is present, apply waterproof band-aids over incisions and change daily
- To avoid infection, keep surgical incisions clean and dry you may shower by placing a large garbage bag over your sling starting the day after surgery
- Once surgical bandages are taken off (2nd day) you may shower, with waterproof Band-Aids in place. Do not scrub the area and pat it dry. NO immersion of operative arm (i.e. bath) Change Band-Aids daily.

3. MEDICATIONS

- Pain medication is injected into the wound and shoulder joint during surgery this will wear off within 8-12 hours
- Most patients will require some narcotic pain medication for a short period of time this can be taken as per directions on the bottle
 - Primary Medication = Oxycodone
 - \circ Take 1 2 tablets every 4 6 hours as needed
 - Max of 12 pills per day
 - Plan on using it for 2 to 5 days, depending on level of pain
- Common side effects of the pain medication are nausea, drowsiness, and constipation to decrease the side effects, take 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 medication changed
- Do not drive a car or operate machinery while taking the narcotic medication
- Ibuprofen 400-600mg (i.e. Advil) may be taken in between the narcotic pain medication to help smooth out the post-operative 'peaks and valleys', reduce overall amount of pain medication required, and increase the time intervals between narcotic pain medication usage.

4. ACTIVITY

- When sleeping or resting, inclined positions (i.e. reclining chair) and a pillow under the forearm for support may provide better comfort
- Do not engage in activities which increase pain/swelling (lifting or any repetitive above shoulder level activities) over the first 7-10 days following surgery



- Avoid long periods of sitting (without arm supported) or long distance traveling for 2 weeks
- NO driving until instructed otherwise by physician
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable

5. IMMOBILIZER (if prescribed)

• Your sling should be worn for comfort purposes only – Encourage you to discontinue sling once block has worn off. Discontinue sling by post op day 3.

6. ICE THERAPY

- Begin immediately after surgery
- Use icing machine continuously or ice packs (if machine not prescribed) every 2 hours for 20 minutes daily until your first post-operative visit – remember to keep arm supported while icing
- DonJoy device may be used.
 - Use unit as frequently as tolerated x 14 days
 - Unit is programmed hour on/hour off continuous of compression and ice alternating
 - If braced* Loosen brace to avoid added pressure

7. EXERCISE

- Begin pendulum, elbow, wrist, and hand exercises 24 hours after surgery complete 3-4 times per day until your first post-operative visit
- If bicep tenodesis was performed, do not do any active elbow flexion. Passive elbow flexion, however, is permitted.
- Formal physical therapy (PT) will begin the day after surgery and should be minimum of 3 days per week. Please ensure physical therapy is scheduled ahead of your surgery date.

8. EMERGENCIES

- Contact Dr. Howard or his staff at 831-648-7200 if any of the following are present:
 - Painful swelling or numbness
 - 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 wrist or hand
 - Continuous drainage or bleeding from incision (a small amount of drainage is expected)
 - Difficulty breathing
 - Excessive nausea/vomiting



- **If you have an emergency after office hours or on the weekend, contact the same office number (831)-648-7200 and you will be connected to our page service)
- **If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

9. FOLLOW UP CARE + QUESTIONS

- Typically the first post-operative appointment following surgery is 10-14 days following surgery
- If you do not already have a postoperative appointment scheduled, please contact the office during normal office hours (831-648-7200) and ask for appointment scheduling.
- The first post-operative appointment will be with Dr. Howard where he will assess the wound, go over post-operative protocol, and answer any questions you may have regarding the procedure