

Andrew J. Pastor, M.D.
Shoulder, Elbow and Sports Medicine

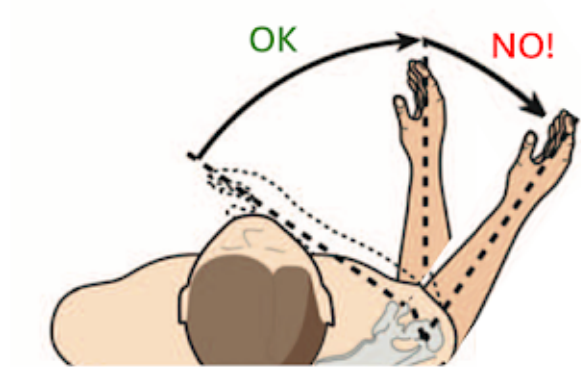
Post Op Instructions Reverse Shoulder Arthroplasty

Activity level- Remain in a sling until your first post-operative appointment. The more you are able to allow your body to rest and recover initially, the better and faster your recovery. Sleeping may be difficult the first few days after surgery and comfortable positioning is important. Sleeping in an inclined position with the shoulder higher than the heart is usually most comfortable and can be done best in a recliner chair or lying propped up by pillows.

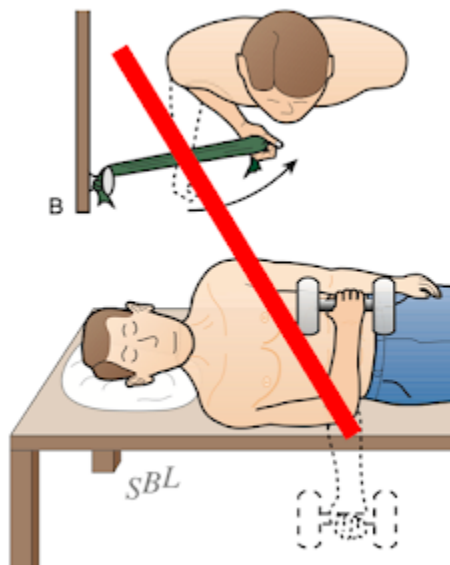
Precautions/activities to avoid- One should not lift anything heavier than a coffee cup for 6 weeks. Repetitive motions such as running should be avoided for 8 weeks. Stationary bike and elliptical trainer use, (without the arms), is fine as tolerated.

Precautions for weeks 1-6 to allow for subscapularis healing:

- **No external rotation past 0 degrees (handshake position)**



- No internal rotation strengthening



Sling- You will be placed in a sling immediately after your surgery. The sling is to support the weight of your arm and for comfort. Wear the sling for 3 weeks after surgery. It should also be worn to bed at night unless you don't move around much. You may extend your elbow outside of the sling frequently to avoid stiffness of the elbow. Desktop level activities are fine.

Dressings- The dressing is waterproof and you are able to shower with it on, or it can be removed after 3-7 days after surgery for showering. Steri-Strips over the incision will fall off on their own in 7-10 days. Clean with simple soap and water and pat dry. Do not soak the wounds for the 2 weeks following surgery! No hot tubs or baths please. You may use skin lotion in all places except over the incisions. Do not apply any special ointments or creams to the incision until the skin is completely healed, typically 3 weeks after surgery.

Physical Therapy- You will begin physical therapy 6 weeks after surgery.

Return to work - You may return to work depending on your job description as early as 3 to 4 days after your surgery. You will need to be off all narcotic pain medication for your brain to function normally. Jobs that have more physical requirements may require longer time away, up to 4 months in cases of heavy labor. Driving requires being off all narcotic pain medications and being comfortable using the shoulder.

Report any of the following symptoms immediately: Fever greater than 101 F, calf pain, pain not controlled by pain medications, redness swelling specific to the incision site, excessive bleeding, problems with pain medication, numbness and tingling of the leg or foot. You may call our office and speak with a member of our office staff during office hours at **(425) 412-1875**.

Follow up with Dr. Pastor will be 2 weeks following surgery. This appointment should have been pre-arranged prior to surgery. At the first visit your sutures will be removed. At that time, you will also start some ankle range of motion exercises. You will follow up with Dr. Pastor again at 6 weeks post-operatively.

Driving after your surgery- You **absolutely** cannot drive until you are completely off narcotic pain medication.

A handwritten signature in dark ink, consisting of a large, sweeping loop followed by a smaller, more complex flourish.

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Based on protocols established by Winston J. Warne, M.D. - Chief of Shoulder surgery at the University of Washington Medical Center