

PREPARING FOR AND RECOVERING FROM SHOULDER ARTHROSCOPY

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I have put this information together with the patient scheduled for shoulder arthroscopy in mind. Each patient's situation is unique and may differ from the general guidelines.

WHAT IS SHOULDER ARTHROSCOPY?

Shoulder arthroscopy is a minimally invasive procedure performed through several small incisions around the shoulder using a camera to visualize structures and special instruments to clean out, repair, or reconstruct injured or worn out structures.

WHAT SYMPTOMS MAY BE HELPED WITH SHOULDER ARTHROSCOPY?

- Shoulder pain that leads to activity limitation or sleep disruption
- Pain when positioning the shoulder for activity above eye level, behind the back, across the body, or out to the side
- Weakness of the shoulder
- Feelings of giving way in the shoulder
- Painful clicking, popping, or catching

WHAT CONDITIONS CAN BE TREATED ARTHROSCOPICALLY?

- Rotator cuff tears
- Labral tears
- Biceps tendinitis
- Bursitis (Subacromial Impingement)
- AC Arthritis
- Shoulder separation or dislocation

HOW SHOULD I PREPARE FOR SURGERY?

- Make alternative arrangements for transportation, dog walking, meal preparation, house cleaning and heavy chores.
- Pick out clothes that are easy to take on and off with limited use of one arm: oversized button down shirts, pants with an elastic waist, shoes that are supportive and preferably without laces.
- You will be given instructions on how to manage prescription and over the counter medications before surgery.
- Do not eat or drink anything after midnight the night before surgery.
- You will receive instructions for cleansing the shoulder and surgical area before surgery.

WHAT CAN I EXPECT WHEN I WAKE UP FROM SURGERY?

- You will wake up with a sling on your operated arm.
- For the first 12-24 hours after surgery, you may have limited control of the operated arm owing to the regional anesthesia or "block" that temporarily numbs and paralyzes the arm for pain control.

HOW DO I SLEEP AFTER SURGERY?

- Getting comfortable to sleep can be challenging after shoulder surgery.
- Some patients recovering from shoulder surgery find it helpful to sleep in a recliner chair or propped up in bed with pillows, but this is not mandatory.
- If you receive instructions that the sling should be worn at all times, this includes while sleeping.

WILL I NEED PAIN MEDICATION?

- Some patients will require prescription medication for a few days after the regional anesthetic block wears off.
- You should discontinue the prescription pain medication as soon as your symptoms allow you to do so, with a goal of discontinuing them at 2 weeks.
- Opioid medication can cause constipation. Walk in a climate controlled environment, stay hydrated, and eat a fiber-rich diet to avoid this problem.
- If not medically contraindicated, taking an anti-inflammatory such as ibuprofen or naproxen in conjunction with or as a substitute for the prescription pain medication can be very effective for controlling pain with fewer side effects than the prescription medication.
- Let me know if you are interested in opioid-free pain medication after surgery.

HOW LONG DO I HAVE TO BE IN A SLING?

- The answer to this depends on whether you are having a “clean up” or whether structures have to be repaired and/or reconstructed.
- Patients just having a debridement or “clean up” will be allowed gentle use of their shoulder within a few days of surgery.
- Patient who had a rotator cuff repair will be in a sling on average 6 weeks.
- If you are having surgery for rotator cuff repair, you should not move your shoulder or discontinue the sling until I have instructed you to do so.
- Remain in the sling at all times except to shower or to periodically bring your hand to your face for eating, brushing teeth, shaving, typing, etc. (i.e. “hand-to-face” or tabletop activity).
- Your hand on the surgery side should remain in front of your face until instructed (wait for clearance from me before reaching out to the side or behind your back).
- When you are bathing you can bend forward at the hips and lower back and dangle your arm out of the sling to straighten out the elbow so it doesn't stiffen up on you and so that you can access your underarm while bathing.

HOW DO I TAKE CARE OF THE INCISIONS?

- The surgical bandage should be kept in place for at least 3 days after surgery.
- Each small incision should then be kept covered with fabric band aids.
- Do not get the incisions wet until you see Dr. Diaz at 2 weeks after surgery.
- Avoid sweating as this can lead to wound infection.

WILL I RECEIVE A COOLING MACHINE?

- For ice machine rental, contact Jim “The Ice Man” at (561) 876-6796
- Whether you use an ice machine or a reusable pack/gel pad, ice is an excellent means of reducing pain and swelling in the shoulder.

WILL I NEED THERAPY?

- Most people undergoing shoulder arthroscopy benefit from physical therapy. If you had a repair or reconstruction, the start of therapy will usually be 4-6 weeks after surgery.

WHEN CAN I DRIVE?

- A recent study showed that it is safe for patients to drive with a sling on as early as 2 weeks after rotator cuff surgery.
- They found that rotator cuff surgery and the use of a sling did not negatively impact their driving ability as early as 2 weeks after surgery.

- You should not drive while taking opioid medication and you should only do so if you feel comfortable.

WHEN CAN I RETURN TO WORK?

- Patients with sedentary jobs may return to work as early as a few days after surgery with some modifications.
- Patients whose job entails heavy lifting, repetitive loading, or above eye level activity with the operated shoulder will require anywhere from 3-4 months off from work unless arrangements can be made for modified job responsibilities (i.e. supervisory, desk/office work).

WHEN I CAN I RESUME ATHLETICS OR HEAVY CHORES?

- This depends largely on the procedure performed and the type of sport.
- For arthroscopy without repair, I clear most patients for full athletic activity at 6 to 8 weeks, depending on the circumstances.
- If I performed a rotator cuff repair or other soft tissue reconstruction, it will be 4-6 months before you are allowed full athletic activity.

Please contact the office or message via the patient portal should you have any further questions.