

General Post-Operative Instructions

Arthroscopic Shoulder Instability Repair

Icing

Icing is very important for the first 7-14 days after surgery. You will be given the option to rent/purchase a cooling machine – this will be arranged before surgery. For the first 3-4 days, a bag of ice or the cooling machine should be used as frequently as possible. After 4 days, ice or cooling machine is applied for 20-minute periods, at least 4 times per day. Care must always be taken to avoid frostbite – there should be a layer of clothing or a cloth/towel between the ice and skin.

Nerve Block

Anesthesia will typically provide a nerve block prior to surgery. It is your choice as to if you would like to receive the nerve block, but it is generally recommended to help with pain control. This decision is made the day of surgery after the anesthesia team explains the risks and benefits. The nerve block is an injection in the area of your neck that numbs the nerves in your arm to reduce pain after the surgery. There are 2 types of nerve blocks: single shot and continuous (nerve catheter). The single shot block typically lasts 14 to 24 hours but this is variable. The continuous nerve block involves the placement of a catheter to allow medication to numb your arm for several days. It is not uncommon to lose the ability to move your arm and hand after the block (often described as a dead arm) – this will resolve as the block wears off.

Sling Use

A sling with a small pillow will be fitted in the operating room and is to be worn for six weeks after surgery. You may release the strap on the sling to straighten and bend the elbow 3 to 4 times per day starting the day after surgery. The sling may be completely removed only for showering and physical therapy.

Physical Therapy

Physical therapy is to be scheduled to start 2 weeks after surgery. It is important to select your physical therapy location and call ahead of time to setup an appointment as many

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physical therapy locations are scheduled out for 1-2 weeks.

You may go to any physical therapy location you wish, but it is ideal to pick one that is close to your home or work. You will be provided a prescription for physical therapy and a rehabilitation protocol at your pre-operative appointment. Please bring these forms to your therapist. If you forget or lose them, you can find them at www.lindsayssportsmed.com under the 'Therapy Protocols' section. Again, you are encouraged to call before or soon after surgery and schedule an appointment to start 2 weeks after surgery.

Activity Limits

- Showering: 48 Hours
- Deskwork: When comfortable with sling
- Driving: 6 weeks
- Using arm for Activities of Daily Living: 6 weeks
- Using arm to reach overhead: 12 weeks
- Using arm to reach behind back: 12 weeks
- Using arm to carry objects: 12 weeks
- Pushing/Pulling: 12 weeks
- Sport/Heavy Activity: When finished with therapy program

Incision Care

After surgery, you will have heavy bandages that may be taken off after 48 hours. If you notice some fluid leaking, you may put on another heavy bandage. Under the bandage, you will notice blue or purple sutures – do not remove these. Sutures will be removed at your first post-operative visit (typically 10-14 days after surgery). If you underwent a biceps tenodesis at the time of your decompression – you will notice steri-strips in the area of your armpit. These steri-strips should be left in place and will be removed at your first post-operative visit.

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You may shower 48 hours after surgery. To wash the underarm area, lean forward and let the arm hang in front of you. It is all right to allow water to run over your incisions. DO NOT get into a bathtub, pool, or spa until your sutures are removed and your incisions are completely healed to lower the chance of skin infection. Always wash your hands before touching your incisions. DO NOT use any creams or ointments on your incisions.

Please contact my office immediately if you notice any of the following as these could be a sign of an infection:

1. Excessive fluid leaking from the incisions after 3 days
2. A foul odor from the incisions
3. Any redness or warmth around the incisions
4. Significant increase in pain.

In addition, please check your temperature if you begin to feel ill, warm, or if you have chills. Contact my office immediately if your temperature is above 101.5 degrees or you think you may have an infection anywhere in your body. It is common to have a low-grade temperature within the first week of surgery. You should drink fluids and breathe deeply.

Swelling and Bruising

It is common to have swelling and/or bruising after surgery. This is caused by bleeding and is expected. The bruising may start out black-red-purple and will change to a yellowish-green color as it fades over a few weeks. The bruising may go down the arm. You may also have some swelling in your hand which should go away; squeezing a ball or making a fist repeatedly will help with this. In time, the swelling will go away.

Discomfort

You may need help with your daily activities, so it is a good idea to have family and friends around to help you. You will have some mild to moderate elbow discomfort. You will be provided a prescription for pain pills after the surgery. Please take your pills as directed and remember to use ice or your cooling device to help reduce pain. If you have pain that your pain pills do not take care of, please contact my office.

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Nausea and Vomiting

It is common to have nausea and/or vomiting for the first 24 hours after surgery. You have been provided with a medication (Ondansetron) that will help with nausea. Please contact my office about any nausea/vomiting that does not go away. You may eat whatever you wish, however, it is suggested that you start with fluids and bland food before moving to a regular diet.

Your Medications

You should start taking all your regular medications right after surgery. If there are exceptions to this, you will be informed. If you have questions contact my office.

Blood Clots

Surgery may slow the blood flow in your legs, which might (rarely) cause a blood clot to form in the leg. If a clot were to form, the leg is usually painful and swollen. Blood clots can be serious and, if you have one, you will need to go to the hospital. Walking regularly early after surgery can prevent blood clots. Moving the ankle frequently and rising up on your toes can lower the risk of this problem. If you are not already on a blood thinner, I would like you to take a full-strength Aspirin (325mg) once daily for 3 weeks – this can help prevent a blood clot. If you were taking a blood thinner before surgery, I will let you know when you can start taking this again after surgery (most often the day after surgery).

Please contact your doctor right away if:

You have swelling, tenderness, pain, warmth or redness in your thigh, calf, or ankle.

Call 911 if you have signs that might mean a blood clot that has moved to your lungs:

- Chest Pain
- Trouble Breathing
- Rapid Breathing
- Sweating
- Confusion