

GLENELG
ORTHOPAEDICS



Post Operative Information

Arthroscopic Shoulder Stabilisation

Gavin Anthony Nimon
M.B.,B.S. F.R.A.C.S. (Orth) F.R.C.S (Ed)
Consultant Orthopaedic Surgeon

Specialising in Shoulders, Hands, Knees and Sports Injuries

Glenelg Orthopaedics
47 Broadway
Glenelg South 5045
Ph 8376 9988
Web <http://www.glen-orth.com>

Fax 8219 0046
A/H 8378 2179

Post Operative Information

Arthroscopic Shoulder Stabilisation

1. A sling will be applied in theatre which will encircle your body. This is to be left on at all times and will only be removed by the physio, who will show you how to do exercises. He /she may change the sling for a more comfortable one. There will be a large wound pad covering smaller dressings. This will be removed approximately 12 hours after surgery. Wound is to be kept dry for 5 days after surgery. **The sling is to remain on at all times.**
2. You will be given an appointment at discharge for follow up approximately 10-14 days after surgery. If you have not been given an appointment card please ring Debbie on 8376 9988 to book an appointment.
3. Physiotherapist will usually see you prior to discharge, but no further physiotherapy will be required until I see you at follow up, but exercises should be continued as demonstrated to you.
4. Usually pain improves on a daily basis, but you should rest at home and slowly do more each day. **If however pain suddenly increases, shoulder swells or redness or fluid discharges, please contact me ASAP- pager available on 8378 2179.**
5. I will review you 2 weeks after surgery, at which time any more specific questions can be answered. If however there are any specific concerns prior, please do not hesitate to contact me on 8376 9988.

Digesic/ Capadex

An analgesia used for mild to moderate pain.
Potential side effects - nausea, vomiting. It is usually prescribed to be taken 4-6 hourly, 3-4 times a day.

Nurofen

Used for temporary relief for minor pain.
Potential side effects - stomach ulceration (Must be taken with food)
Can interfere with Beta blockers, Digoxin.
Asthmatics should not take this medication.

**These analgesics are usually used short term.
Panadol/Panadeine should be sufficient during the longer recovery period.**

Discharge Information

Upper Limb Surgery

Activity /Exercises

Exercises will be explained by your physiotherapist prior to going home. It is important to follow these instructions carefully. **Driving is not permitted while your arm is in a sling or plaster.** If you do not require a sling or plaster it will be 2 weeks before you can commence driving. When you come for your post operative appointment we will let you know when you can commence driving.

Returning to work will depend on the type of work you do i.e. manual or office. Generally a sick certificate will be issued up until the date of your post operative appointment. (approx 2 weeks) when further assessment can be made.

While rest is imperative there is always a risk of developing **Deep Vein Thrombosis** after surgery It is suggested you gently mobilize at home (walking) as soon as possible after your surgery.

The Operative Site

Your wound may be covered with a dressing which will remain on for 5 days after surgery, you may then remove it and leave open to the air until your post operative appointment. **It is normal for some blood or fluid to ooze from the wound but if excessive fluid or blood oozes from under the dressing you should call 8376 9988 for further advice.** If you have small plastic dressings in place leave these insitu until 5 days post operative when they can be replaced once you have showered.

Before handling your wound or replacing the dressing you must remember to wash your hands thoroughly.

Stitches will be removed at your post operative appointment.

If you have been fitted with a sling this must remain on until your post operative appointment.

Hygiene/Showering

Wound and dressing must be kept dry until 5 days after surgery. After the 5th day you can shower but not have a bath. It is important the plastic dressing be pat dried and if required the small plastic dressings can be replaced with bandaids. It is important to keep any larger dressings dry by covering with a plastic bag prior to showering. These will be removed at your appointment. If you wear rings on the hand of the operated limb it is important you do not replace these until you have been seen at your post operative appointment as the hand may still swell some time after surgery.

Pain Management

Pain relief (or a script) will be provided to you on discharge. This amount should be adequate, however you may be required to take occasional “over the counter” medication for the next few weeks. It is not unusual to experience some pain for several weeks after surgery. If you have difficulty managing the pain please contact the surgery for further advice. It is a good idea to take analgesia ½ hour prior to commencing exercises. Following surgery you should resume any regular medication you were on prior to surgery.

Complications/Problems

Swelling, redness, increased warmth of the operated area, if excessive discharge from the wound commences or continues or

if you have a temperature or feel generally unwell please contact me on 8376 9988 ASAP or after hours pager on 8378 2179.

Any numbness or tingling that persists in the hand of your operated limb, even after wrist and hand exercises should be reported to me.

Medication Information

Panadeine Forte or Tramadol
Used for severe to moderate pain.

Potential side effects - nausea, vomiting, constipation, alteration in alertness. Can interfere with alcohol.

These analgesics are very similar in their action and you may be prescribed one **OR** the other **NOT** both.

The recommended dose is 2 tablets 6 Hourly. This is only used up to 6 weeks following surgery.

Endone **Do not take with alcohol**

A strong analgesic used **short term** following surgery.

Potential side effects - nausea, vomiting, constipation, drowsiness/confusion.

Can interfere with some Beta blockers. Can interfere with some antidepressant medication.

Oxycotin

This is not routinely used, as it is recommended for moderate to severe chronic pain.

Potential side effects - dependence, nausea, vomiting, drowsiness and confusion.

Can interfere with some antidepressants.