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PERIOPERATIVE INSTRUCTIONS

Thank you for trusting The Shoulder Clinic with the surgical care for your shoulder or elbow. It is our goal to provide the best possible, most up-to-date, and ethical care.

Your clinic appointment prior to surgery is designed to allow time to complete all necessary paperwork, ensure that the necessary medical work-up has been completed, and to allow time for questions to be answered regarding your surgery. During your visit we will discuss your diagnosis, outline the surgical plan, give you a shoulder sling, and plan for a safe and successful recovery.

<u>MEDICATIONS</u>: Prescriptions for medications will be sent electronically to your pharmacy on file at your preoperative visit or the day prior to surgery. These prescriptions can include pain medication, a stool softener, anti-nausea medication, and when indicated, blood thinning medication to avoid blood clots. If you have any questions about which medications are necessary, please ask your doctor or doctor's assistant. If you plan to go home the same day of your surgery, please plan to pick these medications up before your surgical day and bring them to the hospital or surgery center on the day of your surgery. The discharging nurse will instruct you how to properly use the medications prior to your discharge home from the hospital or surgery center.

If you take medications regularly, please continue to take your medications as you normally would. Let your doctor know if you take a blood thinner, have a bleeding disorder or have a history of blood clots, or if you personally or a family member has had problems with anesthesia. Please also let your doctor know if you take aspirin or "non-steroidal" medications such as Motrin (ibuprofen), Aleve (Naprosyn/Naproxen), Excedrin, Celebrex, or Mobic, Coumadin, or Lovenox as these may need to be discontinued ten days prior to your surgery. If you have questions on which medications to take, or not take, ask your surgeon or surgeon's assistant prior to surgery.

**Please note the following: Requests for refills of pain medications, if needed, should be made during business hours (8:00 AM – 5:00 PM) by calling 208 323 4747. We require at least 24 hours to respond to requests and voicemails, and are only capable of refilling medications during business hours. If you anticipate running out of medication prior to the weekend or holiday, please plan to call greater than 24 hours prior (e.g., call Thursday prior to the weekend) to allow our clinic the ability to properly respond in an appropriate time frame.

SKIN PREP: If you have been instructed on skin preparation and cleaning pads these will be provided or prescribed at your hospital preoperative visit with instructions how to use them. Please be sure to use them as prescribed as they will help prevent infection. Please tell your surgeon if you have a history of infections or have a history of MRSA at your preoperative visit as this may dictate what type of antibiotics we use to help prevent a postoperative infection.

FOLLOWUP APPOINTMENT: You should receive a scheduled date for your first postoperative appointment prior to your surgery. If you did not receive a postoperative appointment, please speak with your doctor or doctor's assistant prior to leaving so this can be arranged. You will be seen within two weeks of your surgery by your surgeon or surgeon's assistant to ensure your wound is healing appropriately, to review your surgery and postoperative rehabilitation, and to address any paperwork needs such as light duty and work release forms that may be necessary. Additional questions may be answered at this appointment. If you were given photos at the time of your surgery, please bring these to your visit so your surgeon can review them with you.

PHYSICAL THERAPY: If therapy is required postoperatively, specific instructions will be provided at the first postoperative visit.

SURGICAL DAY: You will be contacted the <u>day prior</u> to your surgery by the surgery center or hospital, and you will be given instructions on the time and location of your arrival. Please plan to set aside the entire day for your surgery – even if your surgery is very early in the morning. Expect to arrive early and please be patient. <u>Do not eat or drink anything</u> after midnight the night before your surgery, unless specifically instructed by the hospital.

You will meet the anesthesia provider after checking-in on the day of surgery and you will have the opportunity to discuss whether you would prefer a nerve block or other specific anesthesia related concerns. Please tell the anesthesia provider if you or a family member has had problems with anesthesia in the past such as nausea, pain, or malignant hyperthermia.

Your surgeon will see you immediately before surgery to review your paperwork, answer any questions you may have, and to confirm the operative site.

After surgery you will be brought to the recovery room and visitors will be allowed after you are awake. Exceptions may be made for patients under 18 years of age. You must have a friend or family member present to drive you home. An adult must stay with you during the first 24 hours if you are discharged the same day of your surgery.

If you prefer, your surgeon will meet with your designated family, friend, or companion immediately following surgery to discuss the results. If they are not immediately available, your surgeon will discuss the surgery over the phone should you prefer, however you will need to provide a telephone number to your surgeon prior to surgery. Your surgeon will also see you in the recovery room and discuss the procedure and outcome of the surgery, however, most patients are too groggy to remember conversations immediately after surgery. A detailed review of the surgery including arthroscopic pictures, if available, will occur at the first follow up visit. Your nurse can always contact your surgeon if specific questions or concerns arise prior to your departure from the hospital or surgery center.

DRESSINGS/SHOWER: You may shower after your surgical procedure; however, the dressing and incision area must remain clean and dry until your first postoperative visit. Your outer dressing may be removed on postoperative **day four**. White steri-strips will typically cover your incisions – these should remain in place. Yellow antibiotic impregnated tape may overlie the steri-strips. This may be removed with your outer dressing. Once the outer dressing has been removed, the incision area and steri-strips must remain clean and dry until your first follow up appointment. Keep this area protected and/or covered while showering. Most patients prefer to cover their dressing and incision area with "**Press 'n Seal" a GLAD product which can be found at the grocery store**. Do not get your incision wet, do not submerge it in water (e.g., bathtub, pool, hot tub, ocean), do not cover it with ointment. A clean outer bandage may be reapplied if necessary to avoid skin irritation. Should it happen to get wet – let it air dry to avoid separation or maceration of the surgical incision.

ACTIVITY: You will receive specific instructions at the time of discharge from the hospital or surgery center regarding specific activity which is allowed and not allowed, such as weight bearing, home

activity/therapy, brace use and/or sling use. <u>Avoid vigorous activity and physical exercise unless</u> allowed by your surgeon.

<u>DIET</u>: You can gradually return to a regular diet after surgery. Pain medication can cause constipation and nausea. Drink extra water and eat high fiber foods to help avoid constipation. You will also be given a prescription for a stool softener which we recommend that you use.

PAIN CONTROL: If your medications were prescribed prior to your surgery, please bring your pain medication with you on the day of your surgery to receive instructions on proper use. Most shoulder patients find that sleeping propped up in a recliner or with large pillows help ease pain and swelling after shoulder surgery. If your surgery involved the elbow, this area should be elevated on a pillow to avoid swelling. If you received a nerve block, take pain medication before you go to sleep on the night of surgery—the block will wear off while you are sleeping.

ICE THERAPY: Ice can help ease pain and swelling; however, it can be dangerous, particularly if you received a nerve block and your skin is numb. Avoid ice until your nerve block has completely worn off to avoid burning/freezing your skin or harming your surgical area. Never apply ice or cold therapy directly on your skin. You must cover your skin and surgical area with clothing or a clean towel. Use only for twenty minutes at any given time. It may be reapplied 6 to 8 times throughout the day but only after an hour – minimum – between each use. Be sure you do not freeze or burn your skin – regular ice can get too cold and can harm you. Never use dry ice – this will harm you! Be sure to check your skin regularly during use and do not exceed these recommendations.

DRIVING: Driving is not allowed while using narcotic pain medication nor while using a sling. You must not be impaired if driving a vehicle.

REMEMBER: Keep your steri-strips on until follow up. Keep the incisions clean and dry. If you experience any of the following, call your doctor or present to the emergency room:

- 1. Steadily increasing pain or swelling not relieved by elevation/ice/medication
- 2. Redness, warmth, or increased tenderness of the surgical incisions or joint
- 3. Bleeding or drainage from the incision site that does not stop
- 4. Operative extremity and/or fingers that become cold to the touch, blue, tingly, and/or numb
- 5. Temperature >101.5°F
- 6. Unexpected reaction to medication

Chest pain or shortness of breath after surgery is an emergency—call 911.

CONTACT NUMBER: Questions that may arise please call: 208 323 4747

Thank you for trusting us with your care.