

Post-operative Discharge Instructions – Debridement with Biceps Tenodesis

DIET

- Begin with clear liquids and light foods (jellos, soups, etc.)
- Progress to your normal diet depending on your level of nausea

WOUND CARE

- It is normal for the shoulder to bleed and swell following surgery. If blood soaks through the bandage, do not become alarmed, reinforce with additional dressing
- You may remove surgical dressing and shower on the third day after your surgery. Please place a clean plastic covering over the surgical wounds while showering. You can clean your armpit with a washcloth, wiping from front to back, with your arm kept at the side. NO immersion of the wounds in water (ie. bath, pool, spa, etc.). If minimal drainage is present, apply band-aids or a clean dressing over incisions and change daily. The biceps tenodesis wound (near your armpit) should remain dry and covered at all times.

MEDICATIONS

- Local anesthetics are injected into the wound and shoulder joint at the time of surgery. This will wear off within 6 hours and it is not uncommon for patients to encounter more pain on the first or second day after surgery when swelling peaks.
- Most patients will require narcotic pain medication for a short period of time – this can be taken as per directions on the bottle.
- Common side effects of the narcotic pain medications include nausea, drowsiness, constipation, and itching. Take these medications with food to decrease side effects. To prevent and treat constipation, take an over-the-counter stool softener (ie. Colace 100 mg twice per daily) or laxative (ie. Dulcolax). Over-the-counter Benedryl can be taken if there is itching, but monitor your sedation (sleepiness) level.
- If you have had problems with nausea in the past with surgery, you may have had a prescription written for you for an anti-nausea medication (ie. Zofran). Please take as directed.
- Do not drive a car or operate machinery while taking the narcotic medication.
- If you are having pain that is not being controlled by the pain medication prescribed, you may take an over the counter anti-inflammatory medication such as ibuprofen (as directed) in between doses of pain medication. This will help to decrease pain and decrease the amount of narcotic medication required. Take as directed on bottle.
 - If you have any history of kidney problems then check with your primary care physician prior to taking these medications.

ACTIVITY

- When sleeping or resting, inclined positions (ie: reclining chair) and a pillow under the forearm for support may provide better comfort.
- Do not engage in activities that increase pain. Unless otherwise instructed, remain in the sling at all times.
- Avoid long distance traveling for 2 weeks after surgery.

- No driving until instructed by Dr. Kerns
- May return to sedentary work only or school 3-4 days after surgery, if pain is tolerable

SLING

- Your sling should be worn at all times (except for hygiene and exercises as described).
- Do not push up off of your elbow when rising from a bed or chair.

ICE THERAPY

- Icing is very important in the initial post-operative period and should begin immediately after surgery.
- Use icing machine continuously or ice packs (if machine not prescribed) for 20-30 minutes every 2 hours daily until your first post-operative visit. Care should be taken to avoid frostbite while icing by making sure the ice is not directly touching the skin.

EXERCISE

- Sling can be removed for exercises. Otherwise remain in the sling at all times. No lifting with your arm
- While maintaining your elbow by the side, begin elbow, hand, and wrist range of motion exercises immediately. Perform three times/day.
 - You will need to use your other hand to assist your operative arm with elbow range of motion as instructed by Dr. Kerns. These are called active-assist range of motion exercises of the elbow.
- Formal physical therapy (PT) begins within the first week after surgery. You will be given a prescription

EMERGENCIES

- Contact Dr. Kerns' office at the above number if any of the following are present:
 - Intolerable pain refractory to narcotic and anti-inflammatory medications
 - Temperature greater than 101.5 Fahrenheit more than 24 hours after surgery.
 - Significant redness or persistent drainage around the surgical incision
 - Color change in forearm and/or hand
 - Continuous bleeding or drainage from incision (a small amount is normal and expected)
 - Difficulty breathing
 - Severe Nausea and vomiting
- If after hours (Monday-Friday after 6pm), Saturday or Sunday, call Dr. Kerns' answering service at (989) 583-7450. They will connect you to Dr. Kerns or the physician on-call as a backup in the event that Dr. Kerns cannot call you back (if, for example, he is out of the country).
- If you have an emergency that requires immediate attention, call 911 or go to your local emergency room.

FOLLOW-UP

- Follow-up in approximately 7-10 days. If you do not already have a post-operative appointment scheduled, please contact the office at the number above.