

(989) 583-7450

Garrett Kerns, D.O.

Specializing in:

- Sports Medicine
- Arthroscopic & Reconstructive Shoulder, Elbow, Knee and Hip Surgery

Discharge and Home Instructions Shoulder Surgery

The following surgery was performed:

- Arthroscopic: Rotator cuff repair Labral repair Biceps tenodesis/tenotomy Acromioplasty
 Distal clavicle excision Other _____
- Open: Total shoulder replacement Reverse shoulder replacement Fracture Repair
 Latarjet coracoid transfer Other _____

The following anesthesia was utilized: General Peripheral nerve block Local anesthetic

Management after Anesthesia:

- Drink adequate amounts of fluids
- Resume regular diet, beginning with bland, non-spicy foods such as soups and breads and progress as tolerated
- Begin taking all your normal medications that were taken prior to surgery, unless directed otherwise

Pain Management:

- You have been provided with the following prescriptions to help manage your pain:
 - Anti-inflammatory: Diclofenac Celebrex Etodolac
 - Narcotic: Percocet Norco
 - Nerve pain medication: Gabapentin Lyrica
 - Blood thinner Aspirin
- These medications work together to help manage your pain, not eliminate it. It is normal to expect some level of pain after surgery. Begin taking these medications as directed the evening after surgery or as soon as you begin to feel pain, even if the peripheral nerve block or local anesthesia is still providing pain relief. You may begin to taper off the medications as your pain allows.
- Apply ice to the operative site for 15-30 minutes every 2-4 hours for the first 72 hours after surgery. Do not apply ice directly on the skin, as this may cause a burn.

Activity:

- Do not drive or perform strenuous activity for 24-48 hours after anesthesia.
- Sleeping tends to be more comfortable with the operative arm properly supported in the sling, sitting propped upright in bed or in a recliner chair with a pillow behind the operative arm. This position also allows for the placement of ice onto the shoulder throughout the night.

Surgical Incision Management & Bathing:

- Keep the surgical dressing clean and dry. You may remove it after 48-72 hours. If the incisions are dry, they may stay open to the air and do not need to be covered, except for bathing.
- It is normal for dressings to become lightly saturated after surgery in the first 24-72 hours. You may reinforce with additional gauze dressing and tape. Notify Dr. Kerns' office if the dressings continue to be heavily saturated even with reinforcement.
- Remove the sling when bathing and keep your arm resting at your side. Keep the dressings and incisions dry when bathing by covering with plastic wrap and securing with tape, or by covering with some other water proof dressing. Keeping the incision dry is also best facilitated by either taking sponge baths or using a removable shower head directed away from the surgical site. This must be continued until your first follow-up appointment with Dr. Kerns and removal of sutures or staples.

Sling:

- You have been discharged with an abduction pillow sling supporting the operative arm.
- Use of the sling is dependent upon the surgical procedure performed and you should follow the following guidelines:
 - Your sling is provided simply for comfort. It may be removed as soon as it is comfortable to do so over the next 1-3 days. You may perform light activities as tolerated with the operative extremity.
 - Your sling is protecting the surgical repair and must stay in place at all times during the day and night, except for bathing and performing exercises at home or with your physical therapist. Do not use the operative extremity for any activities.

Physical Therapy:

- Appropriate physical therapy is critical to the success of your surgery and recovery and you should follow the following guidelines:
 - Begin physical therapy in 2-3 business days after surgery at designated facility. Take the attached physical therapy prescription with you to the physical therapist. It contains all the instructions for your therapist. If you have not been scheduled for physical therapy previously, ask Dr. Kerns' staff for assistance to schedule this appointment when calling the office to schedule your follow-up appointment with Dr. Kerns.
 - Perform home exercises as instructed prior to surgery or by the physical therapist 1-2 times per day. You may remove the sling for exercises and replace after your exercises are completed. Outpatient physical therapy will be discussed and scheduled at your first follow-up appointment with Dr. Kerns.

Concerns:

- Contact Dr. Kerns Office at (989) 583-7450 if you experience any of the following:
 - Fever greater than 101.5 or chills
 - Excessive redness or drainage from the incisions
 - Pain, numbness, or tingling that is worsening and not managed with ice and medications

Follow-up appointment:

- Call the office at (989) 583-7450 to schedule a follow-up appointment for 1-3 days 7-10 days 10-14 days _____, / / 2016