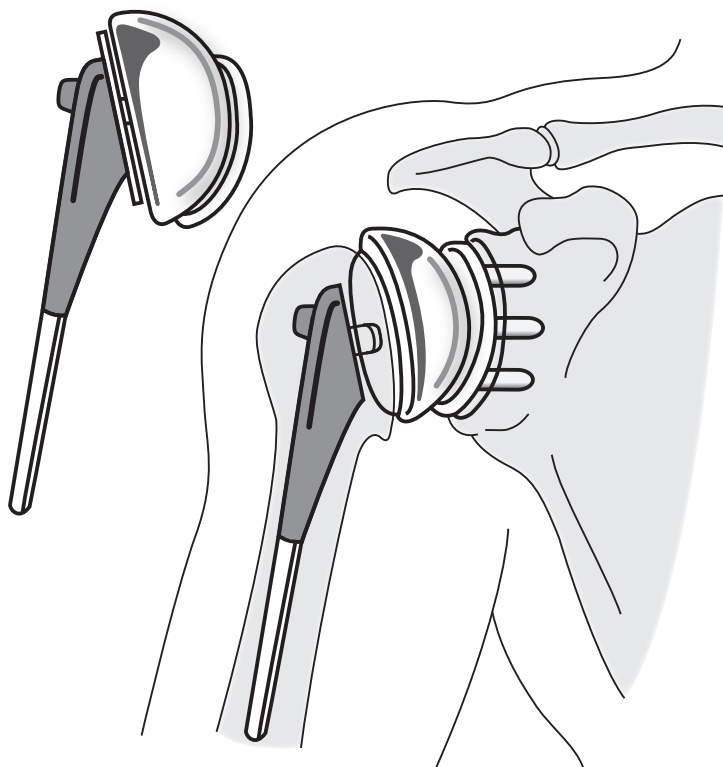


After Your Shoulder Arthroplasty Surgery

Information for people having surgery



Your name:

Introduction

This booklet has been given to you to provide you with the information you need to plan for, and recover from your surgery .

Follow your surgeon's directions to get ready for surgery. You can learn more by reading **Preparing for Your Surgery** available from your hospital Preadmission Clinic.

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Planning for recovery

Home Set-up

It is helpful to set up your home **before** your surgery. This will allow you to easily move around your home after surgery, reduce the risk of falls, and makes it easier to do things with one hand.

- Make sure hallways and rooms are free of clutter and tripping hazards (e.g. scatter rugs, footstools, etc.).
- Add non-slip surfaces to outside stairs and walkways.
- Install stair railings or make sure the existing ones are secure.
- Ensure good lighting in hallways and other well used areas.
- Arrange for help with driving and household chores (e.g. groceries, meal preparation, vacuuming, laundry etc.). Some of these services may not be covered by the Medical Services Plan and will need to be paid by you.
- Move frequently used items to counter height (e.g. pots and pans). Consider moving items in the lower parts of the fridge/freezer to a higher shelf.
- Stock your freezer/pantry with healthy foods and snacks. If needed, private services are available in many areas for food item and meal delivery.
- Keep an icepack in your freezer to use on your shoulder to help reduce swelling after surgery (page 18).
- Arrange to have a thermometer available at home to check your temperature after surgery as needed.
- Use a non-slip bathmat both inside and outside the bathtub or shower.
- **Do not** use towel racks or toilet paper holders to help you to stand or sit. Arrange to have proper hand rails installed anticipating which side your surgery will be on. These are available at medical supply stores or loan cupboards (page 6).
- Wear Velcro closure shoes or slip-on shoes with enclosed heels. You will not be able to tie shoelaces with your affected arm (page 13).
- Consider wearing pull-on, elastic waist pants. Button up shirts or sweaters may be easiest to put on (page 8).
- Extra pillows may help you get comfortable for sleep.
- Practice doing daily activities with your non- surgical arm such as dressing, bathroom functions like toileting, meal preparation.

Arrange for Equipment

Depending on your limitations after surgery and any limitations you already have, the following equipment can be helpful in your recovery. Arrange for any equipment 1 – 2 weeks before surgery to ensure that it fits in your home and is in good working order:

- ✓ Tub transfer bench for tub bath or
- ✓ Shower chair for walk in shower
- ✓ Hand-held shower hose
- ✓ Non-slip mat
- ✓ Long-handled sponge
- ✓ Removable tub clamp, grab bar OR installed grab bars
- ✓ Raised toilet seat with toilet safety frame (arm rests)
- ✓ Bed assist rail (to assist you getting out of bed)

Do not push or pull with your operated arm when using these items until your surgeon or Physiotherapist tells you that it is safe to do so.

To help get dressed:

- ✓ 26” Long-handled reacher
- ✓ 24” Long-handled shoehorn
- ✓ Elastic shoelaces for lace up shoes

Where to Get Equipment	
<p>Red Cross Loan Cupboards www.redcross.ca Toll Free: 1-800-565-8000 or check local listings for area phone number.</p>	<ul style="list-style-type: none"> • Locations throughout BC • Provides “free” equipment for 3 months, however, donations gratefully accepted! • Limited supply of equipment and may not have all the items you need. • REQUIRES a signed Equipment Request Form. You can get this form from the hospital Preadmission Clinic or through your community Occupational Therapist or Physiotherapist. If you do not have a form within 1 week of your surgery, please contact the Preadmission Clinic.
<p>Medical Supply Stores</p>	<ul style="list-style-type: none"> • See yellow page listings for stores in your area • Equipment for rent and/or purchase • May deliver to your home and/or install • Costs may be covered by extended health plans; check your plan
<p>Government Agencies</p>	<ul style="list-style-type: none"> • Veterans Affairs Canada (VAC) Web: www.vac-acc.gc.ca Tel: 1-866-522-2122
<p>Friends/Family</p>	<ul style="list-style-type: none"> • Check with friends and family who may have equipment you can borrow

Doing Daily Activities with One Hand

If your shoulder surgery is planned, it is recommended that you practice doing daily activities with one hand before surgery. This will help you to feel confident after your surgery.

In the kitchen

- To open jars, use a piece of waffle-weave shelf liner to help grip the jar on the counter or between your knees.
- Use rocker knives to help with one-handed cutting, or use pre-cut foods.
- Deep-sided dishes or containers can help keep food on the plate.
- Put the bread or bun inside a container or against the side of a deep pan to keep it still while you put spread on it.
- Keep heavier items on the counter so that you can slide them from place to place.
- Only put lightweight items above eye level in cabinets.
- Store items in easy-to-open containers.
- Store liquids in small containers instead of half gallon or gallon containers.

Personal care

- Use a shampoo bottle with a pump.
- Use liquid soap with a pump instead of bar soap.
- Use a long-handled sponge with a bendable handle to reach your back and opposite side. Wrap the sponge head with a towel after bathing to help you reach the same areas to dry.
- Use pop-top toothpaste instead of screw-on cap. Rest your toothbrush on the counter to put on the toothpaste.
- Put on deodorant by leaning forward and let your operated arm dangle or swing away from your body. Spray deodorant may be easier.
- Use a gooseneck clamp to hold the hair dryer while you use your one hand to comb.
- Use clips to hold hair back instead of rubber band.

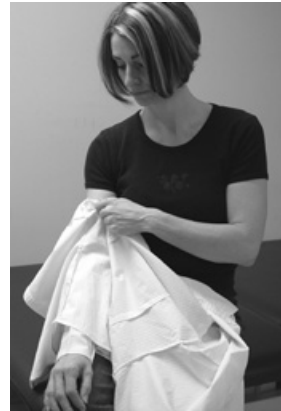
General Rules for Dressing

Begin with the operated arm when putting clothes on. When removing clothes, start with the non-operated arm.

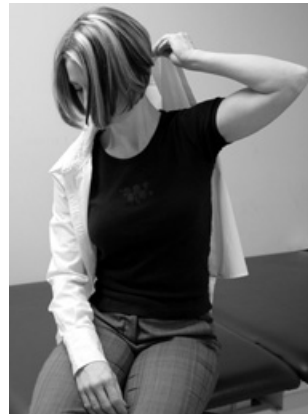


1. Place shirt on your lap with the inside of the shirt facing you and label up. The collar should lie close to your stomach and the tail or bottom of the shirt at your knees.

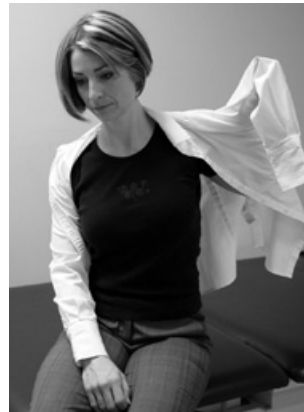
2. Place your operated arm into the sleeve that is directly in front of it. Make sure that the sleeve is pulled up past your elbow.



3. Hold the collar of the shirt on your non-operated side. Lean forward and bring your non-operated arm over and behind your head. Now you can pull the shirt over to your non-operated arm.



4. Put your non-operated arm into the sleeve opening.



5. To straighten out the shirt, lean forward, bring the shirt past your shoulders, reach back and pull the tail or bottom down. Button as usual. Make sure to **not move** your operated arm away from your body.



Putting on a T-shirt or knit shirt

1. Place the shirt on your lap with the front of the shirt face down and the collar or tag at your knees.



2. Roll the bottom edge of the shirt back to expose the sleeve for the operated arm.



3. Move the sleeve opening for the operated arm between your knees and open it as large as possible.

4. Use your non-operated hand to grab your operated arm and place the operated hand into the sleeve opening. Make sure your fingers do not get caught in the sleeve.

It may help to lean forward to let your operated arm drop down into the sleeve.



5. Pull the shoulder seam up the operated arm past the elbow.



6. Put your non-operated arm into the other sleeve opening.



7. Pull the shirt on the non-operated side up to the shoulder as much as you can.



8. Gather the back of the shirt up in your non-operated hand.



9. Lean slightly forward, lower your chin and pull the shirt over your head.



10. Use your non-operated hand and push the bulk of the shirt material over your operated shoulder towards your back.

11. Pull the shirt down over your stomach on both sides. Pull to adjust as needed.



Taking off the shirt

1. Reach back with your non-operated hand behind your neck and start to gather the shirt up in your hand.



2. Lean slightly forward, lower your chin and pull the shirt over your head.



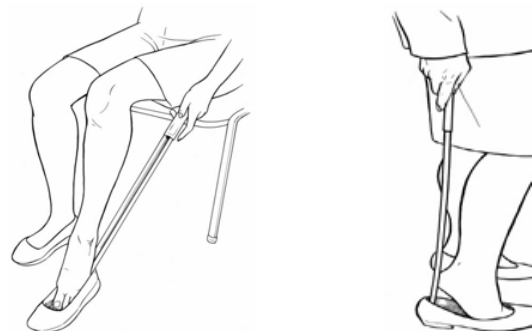
3. Pull your non-operated arm out of the sleeve.

4. Use your non-operated hand to pull the other sleeve off the operated arm.



Putting on shoes

- Use shoes that slip on or use Velcro closures. Avoid shoes that are too loose or flip-flops that may cause you to slip or trip.
- Replace standard shoelaces with elastic laces.
- A long handled shoehorn may be helpful but not necessary if you can manage without.



Putting on socks

- Put your non-operated hand inside the sock, just over the fingers, not up to the palm.
- Cross your leg resting your ankle on the opposite knee or prop your foot up on a stool if you are able to lean forward.
- Slide your toes into the sock, opening the sock by spreading your fingers.
- Pull the sock up to your ankle.

Going to the bathroom

- Use a raised toilet seat or a grab-bar on the non-operated side to help you sit and stand.
- To help with wiping, try long-handled tongs to reach. You may purchase a commercial bathroom aid.

Other

- When reading, use 1 or 2 pillows on your lap to keep the book near eye-level.
- Use rubber bands around each ½ of the book to keep pages open. As you read, slide the next page under the rubber band.
- Use a clipboard to keep paper still while writing.
- Wear a fanny pack at your waist for personal items instead of using purse.
- Try to buy cans with pop-top lids or use a one-handed can-opener.

Physiotherapy Exercises Following Shoulder Surgery

Every shoulder arthroplasty surgery is unique so it is **very important** that you follow instructions given to you by the doctor and Physiotherapist. They will give you instructions on the following:

- ✓ Range of motion (the amount of movement you are allowed to do with your shoulder after surgery).
- ✓ Muscle activity restrictions.
- ✓ Your body and arm position.
- ✓ Sling/immobilizer wear times (amount of time ON and OFF).
- ✓ How long you will be restricted in your movement and activities (usually for several weeks).

Points to remember:

- ✓ **Protect your shoulder in a sling for 6 weeks!** Your arm may be out of the sling for gentle elbow and wrist active motion (see instructions page 17)
- ✓ Passive range of motion shoulder exercises only for the first 6 weeks!
- ✓ Move up to, but **NOT INTO PAIN!**
- ✓ Ice should be applied for 10 – 15 minutes, 4 – 5 times a day. Always put a piece of material (e.g. tea towel) between your skin and the ice.
- ✓ Keep the ice off for at least an hour before you put it on again.

Outpatient Physiotherapy usually begins after your first visit with your surgeon after your surgery.

Do not begin any exercises that have not been approved by your doctor or Physiotherapist.

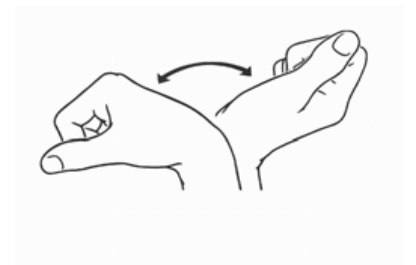
The following exercises are safe to begin right away. These will help limit swelling in your hand and forearm and will keep your circulation pumping well. You should do -10 repetitions of each exercise, 3 times per day. You will be taught to do more exercises for your shoulder once you see your Physiotherapist.

In lying or sitting, with arm kept by your side, bend your elbow as far as possible. Straighten your elbow as far as possible. You can use your non-operated hand to help guide your operated arm.

If you have had a biceps repair or large rotator cuff repair, do not do this exercise until approved by your surgeon or Physiotherapist.



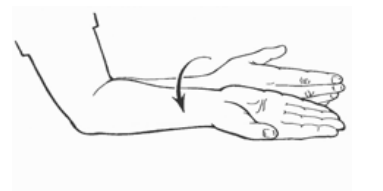
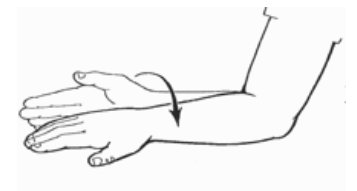
Keeping your arm at your side, bend your wrist forwards and backwards as far as possible. You may need to help with your non-operated hand.



Make a fist or squeeze a rolled cloth or tennis ball.



Keeping your arm at your side, start in a “hand shake” position. Slowly rotate your palm down as fully as possible and up as fully as possible until you feel a stretch in your forearm. **If you have had a biceps repair, do not do this exercise until approved by your surgeon or Physiotherapist.**



Going Home

Care of Your Incision and Bathing

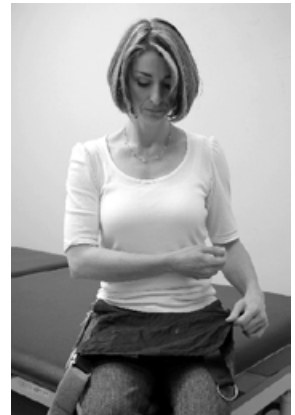
- Your incision will be closed with staples (clips) or stitches. It will likely be covered with steri-strips (small tape-like bandages) and have a light (Mepore®) dressing over top.
- It is normal to have clear (pink or yellow) drainage on the dressing.
- Your incision may be exposed to air once there is no drainage. You may find it is more comfortable to have a strip dressing (e.g. Mepore®) applied. They can be purchased at your local drug store.
- Steri-strips often fall off on their own in about 10 days.
- If they do not, leave them until you see your surgeon.
- If the dressing is wet and requires changing requires changing, follow these instructions:
 - ✓ Wash your hands well before and after changing or removing dressings or touching your incision.
 - ✓ You may use an adhesive gauze strip bandage (e.g. Mepore).
 - ✓ Keep the surgical area clean and dry at all times.
- Your staples or stitches will be removed 7 – 21 days after surgery.
- Once you remove the dressing, you may get your incision wet. You may then shower/bathe. Pat the incision dry with a clean towel.
- Do not soak the incision in a tub bath or a swimming pool or apply oils, creams or lotions to your incision for at least two weeks after stitches/staples are removed and your incision is completely healed. Keep your armpit clean and dry. A folded dry face cloth works well. Deodorant/powder can be applied under your arm on the end of a tongue depressor. Expect some swelling and bruising around the incision or in your arm or hand. It can last a few weeks.

How to Wear a Sling

- The purpose of the sling is for your comfort and to remind you not to move your operated arm more than you have been told.
- **For the first 2 weeks, wear your arm sling at all times except while exercising or bathing.**
- Your doctor will tell you how long you need to continue to wear your sling. This could be up to 8 weeks.

How to Put on a Sling

1. Relax your operated arm on your lap or hold it close to your stomach. Lay the sling on your lap with the opening toward you and the closed, curved elbow end toward your surgical side. Make sure the straps are attached to this end only.
2. Using your non-operated arm, gently bring the sling over your hand and forearm until your elbow fits snugly into the closed end. Gently adjust the sling upward to take up the slack. Place your thumb into the thumb loop.
3. Place the strap around your upper back and over the opposite shoulder. Secure the end of the strap into the top ring of the sling. Adjust the strap until your forearm is horizontal. **Your operated hand should not be hanging down.**
4. **If instructed by your doctor,** place the waist strap around your waist and secure it to the lower ring on the sling. This should be comfortable; not tight.



Activity

These are general guidelines only. In order for your shoulder to heal the best, **you must follow your doctor's specific orders.**

- Follow the exercises on page 15 as allowed.
- Make sure to follow any movement precautions for your shoulder or arm told to you by your doctor or Physiotherapist.
- **No lifting** with your operated arm until your doctor tells you it is okay (usually 6 – 8 weeks).
- Use a cane in your non- operated hand if needed for balance. (no weight-bearing or leaning through your operated arm).
Do not use a walker or crutches.
- Elevate your arm or hand to help relieve any swelling, making sure that you follow the movement rules told to you by your surgeon or Physiotherapist.
- You may return to sexual activity when you feel ready and comfortable.

Returning to Work

- The type of job you have will affect when you can return to work.
- It is helpful to make plans with your employer before your surgery.
- Please talk to your doctor about when you can return to work.

Driving

- You cannot drive yourself home after your surgery. You must arrange a ride home.
- You may drive when:
 - ✓ Your doctor tells you it is okay
 - ✓ You are no longer taking opioids and other sedating medication
 - ✓ You are able to use both arms to control the vehicle safely
 - ✓ You feel comfortable to do so
- You **must** have approval from your doctor to drive in order for your car insurance to be valid in case of an accident.

Healthy eating

- After surgery, start with clear fluids: broth, fruit juices, jello, coffee, tea.
- Gradually increase to a well balanced diet. It may take several weeks to regain your normal appetite.
- If you are taking opioid painkillers e.g. hydromorphone, Oxycodone, Tylenol #3®: eat high fibre foods such as fresh fruits, vegetables, whole grain breads and cereals, or bran to avoid constipation.
- Drink at least 6 – 8 cups of fluid daily.

Preventing constipation

- Prevent constipation and avoid forceful straining during urination and bowel movements.
- Take a stool softener such as Colace® daily if you are taking opioids.
- Increasing fluids, activity, and fibre in the diet can help decrease the chance of constipation.
- If you have not had a bowel movement for 2 days:
 - ✓ Take a mild laxative (eg. Senokot® tablets)
- If you have no bowel movement by the next morning
 - ✓ Take a suppository (eg. Glycerin or Dulcolax®)
- If you have no bowel movement by the next day,
 - ✓ Take a Fleet® enema according to the instructions.
- Ask your pharmacist or doctor to recommend products for you.

Medications

- Restart all the medications you took before surgery unless told not to by your surgeon.

Pain Control

- Take pain medication as directed. It is better to take medication on a regular basis and before the pain is severe, especially in the first 3 days after surgery.
- Pain from surgery is best controlled using a combination of several medications. These can include extra strength acetaminophen (Tylenol®), anti-inflammatory medication (e.g. Celebrex®), drugs that help nerve pain (e.g. Gabapentin® [Neurontin®] or Pre-gabapentin® [Lyrica®]), and opioids (e.g. Morphine, Hydromorphone®, and Oxycodone®). Follow directions from your doctor or Pharmacist for how to safely take these medications.
- Pain medication can cause you to be drowsy or dizzy. Do not drive or drink alcohol while taking these medications. When the pain lessens, talk to your doctor about which pain pills to stop first and how best to wean yourself off them or when to stop taking them.
- Most people have less and less pain over the next 6 – 12 weeks.
- If your pain becomes increasingly worse or if you have pain in a different part of your body, contact your doctor right away.
- It is normal to have some increased discomfort during physical activity or physiotherapy sessions. It may be helpful to take pain medication 1 or 2 hours before doing any of these activities in the first weeks after surgery.
- Ice packs can reduce pain and swelling. Place an ice pack wrapped in a tea towel or pillowcase on your shoulder as directed by your Physiotherapist.
- Pace yourself. Do not push yourself. Regular rest is an important part of your healing process.
- Relax and distract yourself. Use relaxation techniques such as breathing exercises or muscle relaxation. Listen to music, visit with friends, write emails/ letters, take an online course or watch TV.

Managing Stress

- Take the time to heal. Rest often, eat well, and generally take good care of yourself. This will help your recovery.

Call your surgeon/doctor if you have:

- Bleeding: enough to soak through a tissue
- Drainage from your incision that changes in appearance or color, especially if it becomes yellow or green
- Increased tenderness, redness, or warmth around the surgery site
- Irritation or blisters from your dressings or tape
- Pain that is not relieved by your medications
- Difficulty urinating
- High-grade fever (38.5°C/101.3°F and over) for 1 day or more
- Low-grade fever (37.5°C – 37.9°C or 98.5°F – 101.2°F) for more than 2 days
- Persistent nausea or vomiting
- Pain or aching in your calves, redness of the calf, and/or swelling of the ankle or foot.
- **Shortness of breath – Call 911**

If you cannot reach your surgeon:

- Call your family doctor
- Go to a walk-in medical clinic; or
- If it is after clinic hours, go to a hospital emergency.

Special Precautions after Shoulder Replacement Surgery

Follow these precautions if you have had shoulder **replacement** surgery:

- Avoid infections (sinus, chest, dental, skin, etc.).
- If you develop an infection, get treatment quickly. Infection can settle into your new joint with very serious results.
- Tell your doctor, dentist, nurse and other health providers that you have had joint replacement surgery before having any:
 - ✓ Dental work (including routine cleaning), or
 - ✓ Medical procedures (including bladder, prostate, lung or colon).

You *could* be put on antibiotics to prevent infection from moving through your bloodstream to your new joint.

Preventative antibiotics may be used by some patients having dental work *for your lifetime* following joint replacement.

Talk to your dentist or doctor about what is right for you!

Follow-Up Appointments

Within 72 hours of going home:

- Make/confirm two appointments with your surgeon:
 1. One for 7 – 21 days after surgery to have your staples/stitches removed, and
 2. One for 6 weeks after surgery
- Make an appointment to start physiotherapy in the time frame recommended by your surgeon (usually 2 weeks after surgery).

This can be at a private physiotherapy clinic or a hospital.

Resources

American Academy of Orthopaedic Surgeons

<http://orthoinfo.aaos.org/menus/arm.cfm>

The Arthritis Society

www.arthritis.ca

Email: info@arthritis.ca

Arthritis Answers Line: 1-800-321-1433

Arthritis & Surgery Information

The Arthritis Resource Guide for BC

www.argbc.ca

Canadian Orthopaedic Association

www.coa-aco.org

Canadian Orthopaedic Foundation

www.canorth.org/en/patienteducation

and Ortho Connect

www.canorth.org

HealthLinkBC

Offers non-emergency health information to BC residents. Talk to a nurse, Pharmacist or Dietitian. Translation services are available in over 130 languages on request.

www.healthlinkbc.ca

Tel: 811 (or 711 for deaf and hearing-impaired)

Home Safety

Home Safety Renovations (low income seniors)

www.cmhc-schl.gc.ca

Toll Free: 1-800-639-3938

“My Joint Replacement” information

www.myjointreplacement.ca

OASIS Program;

“Osteoarthritis Service Integration System”

Vancouver Coastal Health

www.vch.ca/oasis

Tel: 604-875-4257

Email: oasis@vch.ca

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