



PATIENT NAME:

DOB:

PHARMACY:

POSTOPERATIVE INSTRUCTIONS

PROCEDURE: SHOULDER ARTHROSCOPY WITH SUBPECTORAL BICEPS TENODESIS

NEXT APPOINTMENT:

LOCATION:

PAIN MEDICATION

You will be given a prescription for pain medication after surgery. This should be filled and ready for use when you return home from surgery. You **SHOULD NOT** drive, operate heavy machinery, or participate in activities that require concentration while taking narcotic pain medications such as Percocet, Oxycodone, Norco, Vicodin, or Tylenol with Codeine. You **SHOULD** take an over-the-counter stool softener while taking narcotic pain medications to prevent constipation.

DRESSING

You may leave the dressing intact until you return for your postoperative appointment. If the dressing becomes uncomfortable, you may remove it **NO SOONER** than **3 DAYS AFTER SURGERY**. For example, if your surgery was on a Thursday, **DO NOT** change the dressing until Sunday. Apply Band-Aids over the arthroscopic incisions and dry/sterile gauze over any larger incisions. Keep incision(s) clean and dry. **DO NOT** get the incision(s) wet until you have been seen and given approval by your surgeon. **DO NOT** soak the incision(s) in a tub, pool or body of water for **4 WEEKS** after surgery.

BRACE

You were placed in a shoulder brace after surgery. This brace should be worn **AT ALL TIMES**, including when sleeping. **DO NOT** get brace wet. Brace can be removed for bathing and exercises **ONLY**.

WEIGHTBEARING STATUS

You will be **NONWEIGHTBEARING** on your operative arm. **DO NOT** attempt to lift or carry anything with the operative arm. When bathing, keep arm at your side with hand resting on stomach (*as if it were in the sling*). **NO** reaching away from the body. **NO** active elbow range of motion.

COLD THERAPY MACHINE

If provided, begin using your cold therapy machine after surgery. We recommend use at least 3 times per day, following the manufacturers instructions for setup and utilization of water and ice, for **NO LONGER THAN 45 MINUTES** per treatment. **ALWAYS** make sure to apply a barrier between the cooling pad and your skin. If you have not been provided with a cold therapy machine, apply ice to the surgical area in a waterproof bag for **NO LONGER THAN 30 MINUTES** per treatment.

PAIN MEDICATION REFILL PROTOCOL

You **MUST** give your physician **48 HOURS** notice for any medication refill. Many medications require your surgeon to send the medication electronically and cannot be called into the pharmacy. Prescriptions **WILL NOT** be filled over the weekend. A prescription for the same medication you have been taking after surgery **IS NOT GUARANTEED**.

WHEN TO CALL YOUR SURGEON

Complications after surgery are fortunately very rare. Please contact our office if you have any of the following symptoms:

- >> Persistent fever >101°F, chills
- >> Increasing pain at the surgical site
- >> New onset numbness or tingling
- >> Hives or new rashes

- >> Shortness of breath or chest pain
- >> Persistent nausea/vomiting
- >> Drainage from your incision lasting >5 days