



Shoulder replacement guide



Baylor Scott & White
MEDICAL CENTER

FRISCO

Joint ownership with physicians



What you will find in this guide

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Welcome

We believe that healthcare should be about you and your family. We strive to deliver healthcare compassionately and to act with absolute integrity. Our team of professionals will work closely with you and your family to provide an ideal patient experience. We want to help you heal quickly and get back to the life you enjoy.

We want to put your mind at ease by including you as an active participant in your care. Our goal is to involve you in every aspect of your care. We will rely on you to give us accurate information regarding your medical history, home medications and pain level and to voice any concerns you may have during your stay. It is important to remember that you play a significant role in your recovery.

Our goal is to make you feel comfortable and secure throughout this process. Please ask any questions or share any concerns with the staff so that we can make this experience the best for you. We are committed to you, our patient, and want you to receive quality care during your visit with us. Thank you for allowing us to care for you. It is our privilege to be your healthcare provider.

The information in this guide will help you prepare for surgery and to recover following surgery. Please read through this material several times. Identify any topics you want to discuss with your physician or with the hospital staff. Write down any questions you have and be sure to ask your nurse and physician. We are here to help you through this experience and to meet your individual needs.

Mission

The mission of Baylor Scott & White – Frisco is to provide the opportunity to every individual within Frisco and the surrounding communities the highest standard of healthcare services, designed with excellence, delivered with dignity, and demonstrated with respect to those we serve.



From your care team

We're pleased that you are considering us for your shoulder care. We are excited to walk alongside you during this process.

As a patient undergoing shoulder surgery with us, we want your experience to be as stress-free as possible. This surgery guide is designed to offer additional information regarding your preparation before surgery, the surgery itself and your road to recovery. Our hope is to help reduce your anxiety around your hospital stay by helping you understand what to expect and when to expect it.

As a patient, you will play an active role during your hospitalization. Our goal is to involve you in every aspect of your care. We will rely on you to give us accurate information regarding your medical history, home medications and pain level and voice any concerns you may have during your stay with us.

It is important to remember that you are in charge of your own recovery. Thank you for your dedication to preparing for your surgery. We look forward to meeting you.

About our hospital

Complimentary valet services – Patients and visitors may use our complimentary valet services at the main entrance of the hospital. Valet services are available Monday – Friday from 6:00 AM – 6:00 PM.

Guest information – Our hospital's main entrance is open seven days a week, 24 hours per day.

We do not have set visiting hours, but we ask that your family and friends be sensitive to your recovery needs. Children under 12 must be accompanied by an adult.

Inpatient rooms – All rooms are private and furnished with a couch that folds into a bed if an adult family member would like to stay overnight.

Dining – During your stay with us, you will order your food through our Dine on Demand service. A room ambassador will take your order, or you may place an order at any time by dialing extension 5757 on your hospital room phone. Each patient meal also comes with a complimentary guest meal if a family member would like to eat with you.

Tobacco-free campus – Our campus is tobacco-free with no designated smoking areas.

Our goal is to promote a healthy lifestyle for our patients, staff and families.



Useful phone numbers

Registration.....	214.407.5271
Pre-admission testing	214.407.5166
Social services.....	214.407.5437
Center of excellence coordinator	214.407.5169
Manager, post-surgical unit.....	214.407.5188
Chief nursing officer.....	214.407.5428
House supervisor (after hours).....	972.369.2947
Manager, center of excellence	214.407.5168



Complaints and compliments

After you return home, you may receive a survey about your hospital stay. Our employees believe your comments allow us the opportunity to grow or recognize those who provide exceptional care. You will receive a survey about your hospital stay after you return home. Please fill this survey out and return it as indicated. We value your input.

Comments

We pride ourselves on the customer service we provide for our patients and their families. If at any time you are not satisfied with the care you received, room environment, etc., please let us know immediately. You may file a complaint by contacting any of the following personnel:

- Post-surgical unit manager.....ext. 5188
- Patient advocate
- ext. 5497
- Manager, center of excellence
- ext. 5168
- Center of excellence coordinator
- ext. 5169
- Chief nursing officer.....ext. 5428

Compliments

Our nurses and hospital staff strive to make your stay a pleasant experience. If you feel someone has gone above and beyond to care for you or your family member, please take the time to fill out a Pursuit of Excellence card. These cards are located in the front lobby outside the cafeteria, the nurses stations or may be obtained by asking one of our staff members.

Pursuit of Excellence cards are read by senior administration, the director, department manager and the employee.

Your care team

The following team of healthcare providers is dedicated to helping you have a successful outcome with your surgery:

- Your **surgeon** and **physician assistant** will direct your surgical care and will check on you daily to monitor your progress.
- Your **internal medicine physician or nurse practitioner** will direct your medical care and will check on you daily to monitor your progress.
- Your **anesthesiologist** or **certified registered nurse anesthetist** (CRNA) will provide your anesthesia throughout your operation.
- Your **circulating nurse** and **surgical scrub tech** will assist your surgeon during your operation.
- Your **registered nurses** (RNs) will assess your progress, assist with any needs, give you medication, and provide education before your surgery, in the recovery room and on the surgical floor.
- Your **patient care technicians** (PCTs) will assist with needs, help you walk to the bathroom and take your vital signs.
- Your **respiratory therapists** will monitor your breathing and oxygenation and provide education/assistance as needed.
- Your **physical therapists** will evaluate your needs and help you learn how to safely walk around after your surgery.
- If requested by your surgeon, your **social worker** will evaluate your discharge needs. They can assist you in ordering equipment, discharge planning and follow-up needs.
- Your **room ambassador** will visit you around mealtimes and take orders for your meals for both you and your support person.
- Your **Center of Excellence coordinator** will round on you daily to monitor your progress and review all discharge teaching with you prior to your departure.



Keeping you safe

Keeping you safe is our top priority. We will ask you numerous times throughout your hospital stay to state your name and date of birth and compare it to your identification armband. This ensures that we are providing the right treatment, medication or test during your stay with us.

We want to ensure that we perform the correct procedure on the correct patient at the correct site every time. You will play an active role in this process by verifying your surgery and surgical site with your surgeon as they mark your surgery site in the pre-op waiting area.

Preventing the spread of germs is of utmost importance. Your healthcare team will wash their hands with soap and water or use gel hand sanitizer every time they enter or exit your room. This should also be done by your family members/visitors. If you have concerns that your healthcare provider or family has not washed their hands, please voice your concerns. You will also be provided with hand sanitizing wipes that may be kept at your bedside.



Preparing for surgery

Find your support person

Shoulder surgery is a journey, and it is important to have someone with you during this time. Your support person can be your spouse, family member, friend or relative who will help you during recovery.

Pre-certification and authorization

Many insurance companies require pre-certification or pre-authorization for surgery. Please contact your insurance company or notify them of your upcoming surgery. If pre-authorizations or pre-determinations are required by your insurance company, contact your physician's office and have them contact your insurance provider.

- Workers' compensation and some managed care plans require approval for surgery before a surgical date can be selected.
- You may log on to [BSWHealth.com/Frisco](https://www.bswhealth.com/Frisco) for a current list of contracts with insurance plans, along with contact phone numbers for individual departments throughout the hospital.
- If you work, remember to notify your employer and have your surgeon's office complete any FMLA or short-term disability paperwork prior to your surgery.

Pre-admission testing and appointments

To make sure you are healthy enough for surgery, your surgeon may require you to be seen at our

pre-admission testing clinic located here at the hospital. At this appointment, you may have tests completed such as blood, urine or an electrocardiogram (EKG) to evaluate your heart. You will discuss your medical history with the pre-admission nurse, internal medicine doctor or nurse practitioner. The results of this appointment will let your care team decide if you are cleared and ready for surgery. If necessary, you may be required to see a specialist for further testing to be cleared for surgery. You can reach our pre-admission testing clinic at **214.407.5166**.

Pre-operative education

Prior to surgery, a link to our pre-operative education video will be either emailed to you or reviewed at your pre-admission testing visit. You may also access this video by visiting [BSWHealth.com/Frisco](https://www.bswhealth.com/Frisco). Select the "Specialties" tab, choose "Total Joint Replacement," scroll down to the "Shoulder Surgery Education Video" section and follow the prompts to watch the video.

If you have any questions regarding your pre-operative education, please reach out to the shoulder coordinator at **214.407.5169** or email us at BMCF-TJP@BMCF.com.

Home modifications

To make your home safer and more practical after your surgery, a number of simple changes can be made. Your physical therapist may have additional suggestions for you during your hospitalization.

- Remove any trip hazards around your home (rugs, cords) and move frequently used items to places you can easily reach them.
- Arrange for assistance with household chores, driving and errands.
- Arrange for help with childcare and pets.
- Purchase groceries and prepare meals in advance.
- Make sure lamps can be turned on and off easily, preferably from bed.
- Have available a high, stable chair with a firm seat cushion and armrests.

Pre-operative checklists

Use these checklists to help prepare you for surgery.

Surgical checklist:

- ☐ Medical clearance appointment date/time:

- ☐ Specialist appointment date/time: (if applicable)

- ☐ Call received from pre-admission nurse
- ☐ Call received from registration
- ☐ Quit smoking
For help, call 1.800.NO.BUTTS (662.8887).
- ☐ Medical equipment received (if applicable)
- ☐ Discuss my discharge plan with my family and friends
- ☐ Surgery date/time:

- ☐ Arrival time (You should receive a call the day before your surgery from your surgeon's office.)

Your surgical timeline

One month prior to surgery

- ☐ Ensure all medical leave of absence paperwork is submitted to your surgeon's office.

Two to three weeks prior to surgery

- ☐ Pre-admission testing completed (if applicable)

Seven to 10 days prior to surgery

Medications: Follow your surgeon's specific instructions regarding your home medication. However, it is important to stop all blood thinning medications seven to 10 days prior to surgery. This includes aspirin, aspirin-containing products, ibuprofen or certain anti-inflammatory drugs (Celebrex, Meloxicam, Aleve). It is also important to discontinue the use of over-the-counter supplements at this time. Please refer to your surgeon for questions. If you take prescription blood thinners (Lovenox, Coumadin, Eliquis), please get specific instructions from your surgeon.

Three to five days prior to surgery

Pre-operative bathing/benzoyl peroxide gel

instructions: Good personal hygiene is very important before and after your surgery to reduce the risk of complications. Your skin is not a sterile surface; that is, there are normal bacteria (germs) that live on the surface of your skin. These bacteria are typically harmless as long as they stay on the surface. However, during surgery, we cut through the skin surface and potentially allow bacteria to enter the surgical incision, thereby increasing your risk of infection. Prior to surgery, we like to reduce the number of bacteria that are living on the skin's surface to help prevent surgical infections.



Please follow these guidelines for cleaning your skin before surgery:

- ☐ Purchase a 4 oz. bottle of any chlorhexidine gluconate soap, also called CHG. You can find this soap at most pharmacies and major retailers. No prescription required. This special soap works to decrease the number of germs on your skin.
- ☐ Do not shave your arm/armpit within three days of surgery.
- ☐ Remove any body piercings prior to showering and do not replace them until after surgery.
- ☐ Shower schedule (no baths):
 - Three days prior to surgery: Cleanse the operative site only.
 - Two days prior to surgery: Cleanse the operative site only.
 - Night prior to surgery: Cleanse from neck to waist.
 - Morning of surgery: Cleanse from neck to waist.
 - Shower as normal and be sure to shampoo your hair with your normal shampoo. Rinse off completely.



- Gently wash the entire shoulder/armpit/arm with the chlorhexidine gluconate soap and leave on the skin for three minutes (turn off water to prevent rinsing off chlorhexidine gluconate soap too soon). Do not scrub your skin, as this could cause a rash or irritation. After three minutes, rinse off. Do not use any other soaps or body washes on your skin after this step. Pat your skin dry with a clean, dry towel.
- ☐ Do not use lotion, powder or any other creams on the shoulder/armpit/arm after using the chlorhexidine gluconate soap except for the benzoyl peroxide gel.
- ☐ Apply benzoyl peroxide gel over the front of the shoulder and armpit two times/day for two days prior to surgery. Please apply on the morning of surgery.
- ☐ Try to avoid getting chlorhexidine gluconate soap in your eyes, mouth, ears or genitals. If this happens, rinse the area thoroughly with water.

Benzoyl peroxide 10% cream or gel can be purchased from CVS, Walgreens, Target or Walmart. Generic brands are preferred and usually cost less than \$15. Stop using the benzoyl peroxide if you have any skin rash or adverse reaction.

Night before surgery

- ☐ Shower as instructed above.
- ☐ Do not eat or drink anything after midnight.

Three hours before surgery: Drink your ENSURE pre-surgery CLEAR drink or 12 ounces of a clear sports drink (any color but red). Drink the entire amount in a five-minute time frame. If you have diabetes, drink a sugar-free or low-sugar sports drink.

Day of surgery

- ☐ Shower and cleanse as instructed above.
- ☐ Arrive to the hospital at your scheduled time and report to the front desk in the main lobby.
- ☐ Do not wear makeup or nail polish.
- ☐ Wear loose-fitting clothing. After surgery, you will be wearing a sling and will have limited use of your arm.

Packing checklist

Medical items:

- ☐ CPAP or BIPAP machine (if applicable)
- ☐ Home medications in the original bottles excluding:
 - Anxiety or sleep medication:
Lorazepam, Alprazolam, Ambien
 - Pain medications: Oxycodone, Hydrocodone, Morphine, Tramadol, Lyrica
 - Supplements or over-the-counter medications
- ☐ Medical equipment as instructed by your surgeon

Paperwork:

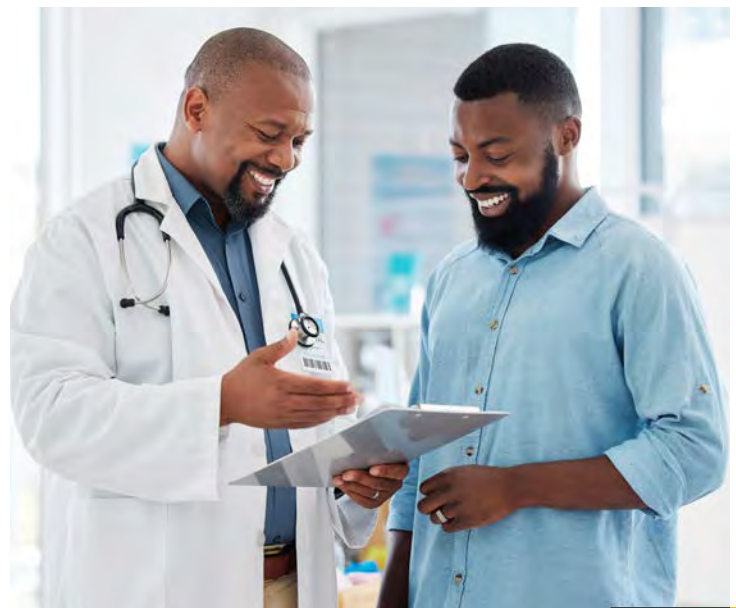
- ☐ Copy of Advanced Health Directive (if applicable)
- ☐ Driver's license or photo ID
- ☐ Power of Attorney (if applicable)
- ☐ Insurance card

Personal Items:

- Loose-fitting clothes (e.g., shorts, sweats, oversized shirt, nightgown, etc.)
- Underwear and socks
- Personal toiletries
- Eyeglasses, contact lenses with case/ solution (if preferred after surgery)
- Dentures or hearing aids with working batteries
- Phone charger

Do not bring:

- Valuables, such as jewelry, credit cards or debit cards



Arriving for surgery

- Please report to the front desk in the main lobby. When you check in at the desk, you will be asked for your insurance card and identification and will receive a pager.
- A staff member will escort you to your pre-op room. You will change into a gown, and a nurse will start your IV.
- You will meet your anesthesiologist. They will discuss the anesthesia with you, options available and the best anesthesia technique for your medical history.
- You will meet with your surgeon. They will talk with you and will answer any final questions you may have.
- Two family members or support people may wait with you before your surgery.

During surgery

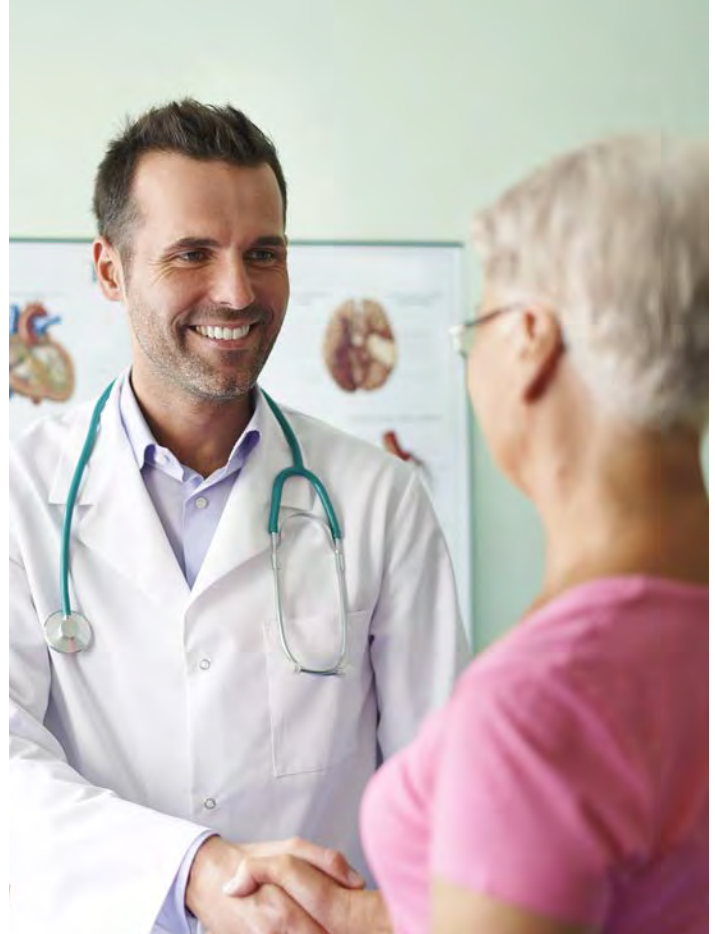
While you are in surgery, your family will wait in the front lobby with the pager. Complimentary refreshments and coffee are available in the waiting area. Surgery times vary depending on the type of surgical procedure. If at any time your family would like an update on your status, they can request that information from our team at the front desk. When your surgery is complete, the staff will escort your family to a consultation room where your surgeon will discuss your progress.

After surgery

You will wake up in the Post-Anesthesia Care Unit (PACU) and typically will remain here for one to two hours. During this time, you will be closely monitored until you wake up and your heart rate, blood pressure and breathing are normal. Because this is a small area, your family will remain in the lobby area until you are transferred to your inpatient room.

In the PACU:

- You will have an IV in your arm so you can receive medication and fluid.



- You will have oxygen delivered through a tube in your nose.
- You will have a blood pressure cuff on your arm to monitor your blood pressure and a monitor on your finger to watch your oxygen levels.
- You will have a compression device on your legs to help prevent blood clots.
- Your nurse will frequently ask you about your pain and will manage your pain as indicated.

When you meet discharge criteria from the PACU, you will be transferred to your inpatient room. A member of the staff will notify your family, and they will be escorted to your room soon after. Some procedures do not require an overnight stay. Some patients may discharge from the recovery area to home.

In your inpatient room

When you are transferred to your inpatient room, your nurse will be monitoring your vital signs (heart rate, temperature, blood pressure and breathing) frequently. You will be placed on a monitor to continuously watch your heart rate and oxygen levels. Our staff will notify your family members and direct them to your inpatient room.

Your care plan

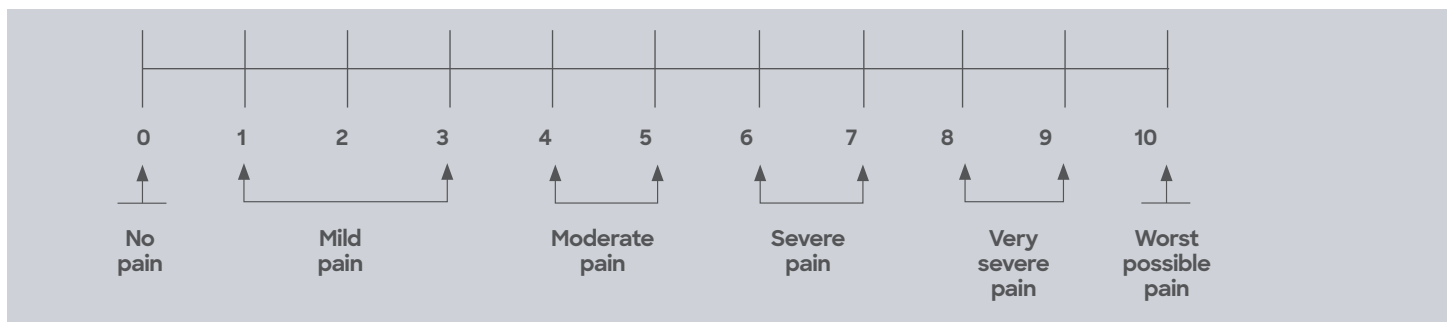
The following is an example of what to expect the first few days after your surgery.

	Day of surgery	First day after surgery	Following days
Surgical care	• Use the incentive spirometer 10 times every hour while awake. • Do 10 ankle pumps every hour while awake.	• Plan to sit in a chair for all meals. • Use the incentive spirometer 10 times every hour while awake. • Do 10 ankle pumps every hour while awake.	
Participate in physical therapy	• Sit on the edge of the bed or get into a chair. • Walk a short distance with therapy team. • Do not get out of bed by yourself.	• Participate with therapy team. • Get out of bed or up to the chair with help. • Do not get out of bed by yourself.	• Continue exercises and slowly increase your walking distance. • Practice skills needed for home.
Diet	• When it is time to start eating, you will start with clear liquids (chicken broth, juice, Jell-O). • If you are tolerating liquids, your diet will be advanced to a regular diet if instructed by your surgeon.	• Drink plenty of fluids and include fresh fruits and vegetables. • Continue drinking Ensure shakes if you purchased them prior to surgery.	
Medication	• Begin oral pain medications. IV pain medication may be given if needed. Notify your nurse if your pain is not under control. • Your home medications will be restarted as approved by your doctor and will be given to you by your nurse.	• Continue your home medications that are given to you by your nurse. • Continue to manage your pain with oral pain pills.	
Bathroom	• Call for help when you need to get up to go to the bathroom.	• Call for help when you need to get up to go to the bathroom.	
Dressing	• You will have a bandage over your incision.	• You will be instructed on how to care for your dressing at home.	
Discharge planning	• If ordered by your surgeon, you may meet with a social worker to discuss discharge needs.	• Arrange to have someone take you home when you leave the hospital.	
Drainage tubing	• You may have a drainage tube to drain fluid from your surgery site.	• Your drainage tube may be removed today.	

Pain

It is important to realize that pain is an integral part of the surgical process. Post-surgical pain helps us to understand your limits when working with physical therapy or when you are moving or walking with your nurse. An increase in pain medication can result in decreased breathing and drowsiness. Because of this, it is important that you are not over sedated with pain medication. We will do our best to keep your pain at a tolerable level; however, **it is likely that you will experience some pain after surgery**. Your doctor will prescribe different types of pain medications depending on your type of surgery, medical history and pain level.

You will be asked to rate your pain level on a scale of 0 - 10 multiple times throughout your hospital stay. Please familiarize yourself with the pain scale below.



Do not hesitate to ask for pain medication at the first sign of discomfort. Asking for the medication early is better than letting the pain become more severe. If it is too soon for more medication, or if it is not safe to give more medication because of your vital signs or breathing, the nurse may change your position, turn your pillow or try other alternatives until it is safe for more medication.

Types of pain medication

The type and amount of pain medication you will receive will be determined by your surgeon based on your medication history and pain level. The different methods in which we will give you pain medications are:

- **Nerve block:** To help with pain control after your surgery, you will receive a nerve block with a local anesthetic to numb the area around your shoulder. The nerve block usually lasts 24 - 72 hours.

- **Oral:** After your surgery, you will be started on oral pain medication as soon as possible. This medication will be continued throughout your hospital stay. Common pain medications include Norco (Hydrocodone) and Percocet (Oxycodone).
- **IV:** The most common IV pain medications that are given after surgery are Dilaudid or Morphine. If oral pain medicine is not controlling your pain, IV medication may be given.

Common side effects of pain medication include decreased respirations/breathing, drowsiness, nausea, vomiting, dizziness, constipation, rash, itching, dry mouth, headache and decreased appetite.

Activity

After your surgery, you will be evaluated by our therapy department. They will focus on safe movements and keeping you as active as possible within the limits of your surgery.

Our therapy team will teach you how to:

- ☐ Work on activities of daily living with the sling
 - ☐ Donning the sling on/off
 - ☐ Hand/wrist/elbow range of motion exercises
 - ☐ The sling/shoulder immobilizer should be worn as advised by your surgeon. When your arm is out of the sling, just let it hang by your side. Do not use it.
 - ☐ Your activities will be advanced under the supervision of your surgeon and therapist
- according to your progress, healing and comfort level.
 - ☐ For approximately six to eight weeks after surgery, while lying on your back, a small pillow or towel roll should be placed behind the elbow. This prevents you from extending the shoulder joint and stretching the underlying muscles. You should be able to see your elbow when lying flat.
 - ☐ Therapy will be prescribed by your surgeon's office.

***Do not remove the sling or start exercises until instructed by your surgeon.**

Preventing blood clots

Ankle pumps - AP

Bend your foot up and down at your ankle joint as shown.

Note: Keep on doing ankle pumps throughout the day, as it is the most important exercise for leg blood circulation and prevents blood clotting and swelling.

Repeat	20 times	Perform	3 times a day
Complete	4 sets		



Total shoulder precautions

You may be instructed to avoid these movements after your surgery. The length of time for these restrictions varies depending on your surgery and your surgeon's instructions.

- Keep the sling on at all times until instructed to remove by your physician.
- Avoid reaching out to the side.
- Avoid turning the arm in or putting your hand across your body.
- Do not use the arm to push yourself up in the bed or from a chair. This requires forceful contraction of muscles and may cause you to re-injure your joint.
- Do not lift anything heavier than a glass of water until allowed by your surgeon.
- Avoid placing your arm in an extreme position, such as straight out to the side or behind your body.

Recognizing and preventing complications

Complication	Signs and symptoms	What do I do?	Prevention
Blood clot in your leg (deep vein thrombosis, DVT)	(Signs and symptoms are usually located in the calf of either leg) • Swelling • Warmth/redness • Pain	Call your surgeon	• Short, frequent walks during the day • Rest with your legs elevated
Blood clot in your lungs (pulmonary embolism, PE)	• Shortness of breath • Coughing • Chest pain or chest pain with deep breaths • Rapid heartbeat	Call 911	• Short, frequent walks • Rest with your legs elevated
Infection	• Temperature >101.5° (*It is common to run a low-grade temperature (<101.5°) after surgery) • Bright red color around your incision • Increased pain or swelling around your incision • Drainage from your incision site	Call your surgeon	• Follow your surgeon's instructions regarding care of your dressing • Keep pets away from your incision
Constipation	• Having fewer than three bowel movements in one week • Straining to have a bowel movement • Stools that are hard, dry or larger than normal • Pain in the lower abdomen	Call your surgeon or primary care physician	• Drink lots of fluid • Eat high-fiber foods (fruits, vegetables, whole grains) • Walk frequently • Take constipation medication as ordered by your surgeon

Activities of daily living with a sling or immobilizer

Wearing a shoulder immobilizer or sling

A shoulder sling is used to support your arm after injury or surgery. It may also be used to limit movement or to raise the arm to reduce pain or swelling.

When to wear a sling:

- All the time until your follow-up appointment and your surgeon directs you otherwise
- As needed for comfort
- Remove your sling each day to wash your arm or do your exercises

Putting on the sling

Your sling will have:

- A strap that fits over your shoulder and back
- A pouch or pocket to hold your elbow and lower arm

How to put on the sling:

- Start by sliding the closed end of the sling over your hand on the injured arm.
- Fit the sling on your arm so your elbow is back in the pocket as far as it will go.
- The long strap of the sling should go from the back of your injured arm, across your back to your other shoulder and down your chest. If you are not able to work the strap around, you may attach the strap to the fastener and then lift the strap over your head to the opposite shoulder.
- Attach the long strap to the fastener on the sling near your wrist.
- Adjust the length of the strap so your hand is always at or above the level of the elbow.
- Move the pad on the shoulder strap near your neck so it feels comfortable.

Taking off the sling

- Loosen the fastener and take the strap out.
- Gently remove the sling from the injured arm.

Care while wearing the sling

Unless you have been instructed otherwise, follow these general care guidelines:

- Adjust the strap on the sling so your hand is slightly higher than your elbow. This helps to reduce swelling.
- Be sure your elbow is back in the pocket of the sling as far as possible.
- Smooth the sling so there are no wrinkles along your arm that may cause sore spots.
- Remove the sling each day to wash your arm and shoulder.
- Use a damp washcloth to wash your armpit and skin. Dry well with a towel. Limit movement of your injured arm.
- Ask about exercises for your fingers, wrist and elbow.
- Your sling can be hand washed and air-dried. You may need to purchase another sling to wear while one is being cleaned.
- Talk to your doctor, nurse or therapist if you have any questions or concerns.

Bathing

It is vital that you regularly loosen and/or release the sling/immobilizer to exercise and move your elbow, wrist and hand to prevent stiffness of these joints at least four times every day.

- Getting washed: For the first three weeks, you may still be sore from the surgery, and you will probably need assistance washing your non-operative arm. You should not use your arm that just had surgery for this. It would be a good idea to use a shower with an extension for the water. Please remember to keep the surgical wounds dry and protected while washing.

The waist up can be washed with warm soapy water. Armpits are difficult to clean and complete regular washing is really important.

Avoid using antiperspirant spray until the incision is healed. At six weeks, your function should be closer to what is “normal” for you.

Getting dressed

You will find it easier to wear clothes that are oversized. Dress your operated arm first. Sit on the edge of a chair or stand with your arm “hanging” by your side. Slide your operated arm into the garment first using your un-operated arm. Once this arm is full in the sleeve, bring your garment over your head and put the other arm in. Any fasteners must be fastened with your un-operated arm. Once you have dressed your upper body, place your arm back in the sling.

Feeding

For the first few weeks, it would be a good idea to eat only with the non-operated hand.

Transferring

Use only your non-operated arm to help you get out of a chair, bed, toilet or bath. After six weeks, you may return to using both arms.

Sleeping

You may find it easier to sleep on your back for comfort, with a pillow under your arm for support. You may find it comfortable to sleep sitting up in a chair.

Driving

Driving a car is not allowed for two to four weeks after surgery. Your physician must give approval prior to driving.

Returning home

When you meet discharge criteria, your surgeon will discharge you from the hospital. Most patients will be discharged home, but if you need help getting stronger before going home safely or if you have a medical condition that requires further care, you may be transferred to:

- Inpatient rehab facility
- Skilled nursing facility
- Home healthcare

This decision is made between you, your surgeon and your social worker. For further questions regarding care at home, please call a member of our social work team at **214.407.5437**.

Transitional care clinic

Our commitment to your care and safety doesn't end at discharge. Our Transitional Care Team is here to help bridge the gap between discharge and follow-up appointments. You will receive a telehealth call from one of our transitional care clinic nurse practitioners within 48 hours of discharge to monitor your progress. To improve overall quality of care and to prevent readmissions, participation in this call is highly encouraged. If you have any questions or concerns, you may call or text **214.247.1670** to reach one of our nurse practitioners. Our Transitional Care Team is available seven days a week during normal business hours.

Remember

- It is normal to feel anxious about returning home after shoulder surgery. It is OK to ask your support person, family or friends for help.
- Stay active! Continue the exercises that were taught to you while in the hospital and walk frequently during the day.
- Follow any restrictions given to you by your surgeon.
- Keep an eye on your food and fluid intake. Remember to drink plenty of fluids and eat a well-balanced diet.

- Be aware of constipation. This is a common side effect of your pain medication and can cause many problems. Increase fiber and fluids in your diet.

Goals for going home

- Communicate an understanding of shoulder precautions and positioning in bed.
- Get in and out of bed without assistance.
- Walk 200 feet without assistance.
- Move from the bed to a chair and walk to the bathroom.
- Climb and descend curbs/stairs with the aid of an assistive device and supervision.
- Be able to dress yourself with supervision or with minimal assistance from family.
- Be able to perform your bathing and toileting with supervision or minimal assistance from family.

**Goals may change based on individual patient needs.*

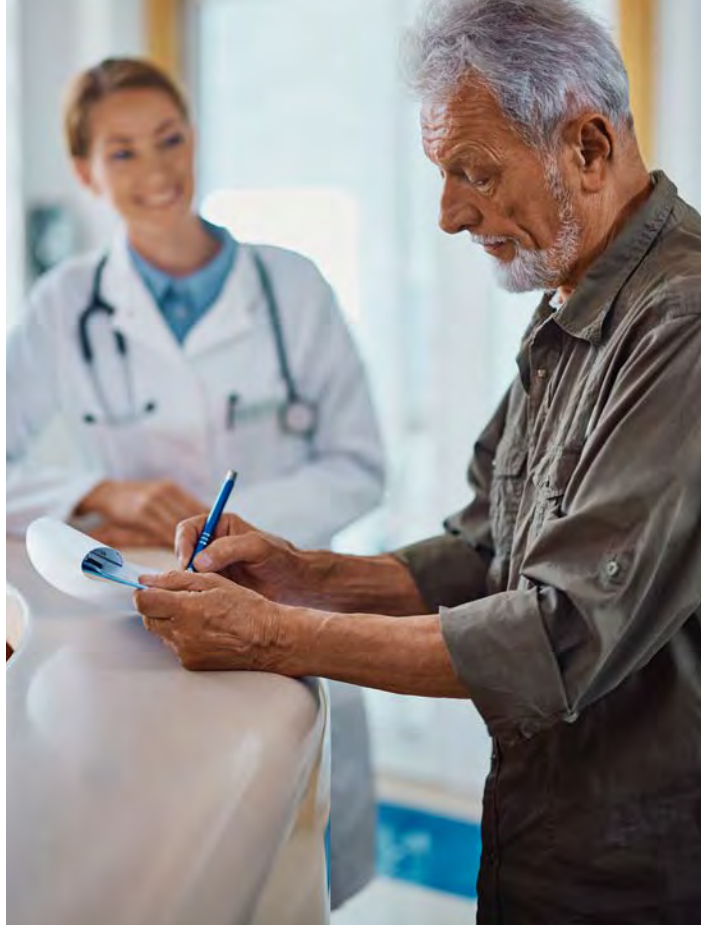
Equipment

Some patients may require medical equipment after their surgery. Your surgeon and therapy team will evaluate your needs and determine what equipment, if any, will assist in your recovery.

Your surgeon may require you to wear a sling or immobilizer after your surgery. Typically this will usually be provided in your surgeon's office before your surgery. Before you are discharged home, our therapy team will ensure you are comfortable with putting your sling or immobilizer on/taking it off and how to keep it clean at home. It is important to wear your sling or immobilizer exactly as ordered by your surgeon.

Final thoughts

For any questions regarding this material, please call **214.407.5169** to speak with our shoulder coordinator. Again, we thank you for your dedication to preparing for your surgery. We look forward to meeting you soon.



Notes

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Notes

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



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