

First Postoperative Visit After ARTHROSCOPIC ACROMIOPLASTY OR DISTAL CLAVICLE EXCISION

Edward G. McFarland, M.D. Johns Hopkins Sports Medicine (410) 583-2850

What to expect at this visit:

The first visit after surgery is to make sure that you are doing well and that all of your questions are answered. The main events in this visit will be to examine your shoulder and to remove your stitches. In some instances we may need to get an X-ray of your shoulder. For your examination the doctor will need to see your whole upper extremity, so women will need to be in a shoulder gown and men will have to remove their shirts. The immobilizer you were given can be worn during the visit if it makes you more comfortable.

First the doctor will check your incision and examine your arm. You should have good motion of your elbow, wrist and fingers with little swelling. Let the doctor know if you have any areas of tingling or numbness. Most patients with an acromioplasty or distal clavicle excision should be able to do pendulum exercises as shown in the hospital and may be asked to demonstrate these in the office.

What should you do for pain?

Pain relief after surgery is very important and you should discuss it with the doctor. You should take medication as needed to keep you comfortable and also to allow you to move the shoulder so that it does not get stiff. The best medicine for pain relief is narcotics and you should let the doctor know if you are running low on medicine. Oftentimes the medicine you were given when you left the hospital is too strong as your pain improves, so a prescription can be written for a pain medicine not as strong.

Another way to keep the pain down is to use an anti-inflammatory medication, such as ibuprofen, naproxen or other arthritis medicines. You should not use these medicines if you have a history of ulcers, peptic ulcer disease, kidney disease, liver disease or if you are on blood thinners. If these tend to upset your stomach or if you are on blood thinners, new medicines such as Celebrex or Vioxx might be better.

There are also some pain medications which are not narcotics but give good pain relief. An example of this is Ultram. This medicine can also upset your stomach but it depends upon the individual.

Lastly, the ice device you were given will continue to keep down your pain. We recommend that you use it at least two to three hours a day for the first three to four weeks after surgery. It may still be helpful at night prior to bedtime for awhile and some patients find that they sleep better when wearing it. You should use it as long as you find it helpful, and there is no harm using it many hours of the day. It is helpful sometimes to use it after doing your exercises and stretching.

What about my sling?

You should use your sling as much as you need for comfort. We recommend that you use it outdoors and at night for the first two to three weeks after surgery. If you are a fitful sleeper, we recommend that you use it for the first six to eight weeks after surgery. You do not need to wear the sling during the day as long as you support the arm. If letting the arm hang causes you pain, then you should not let it hang down without support. It is best to treat your arm with some care and caution during the first two to three weeks to let it heal.

What about showering or bathing?

Every physician will have his own opinion about this, but we recommend that you not get the incision wet for four or five days after surgery. Even then we recommend only a shower and that you not soak the incision in the bathtub or in a hot tub. We generally recommend that you not use a bath to get the incision wet for two to three weeks after surgery. Heating your shoulder such as in a hot tub may get it irritated, so use your judgment.

What can I do with my shoulder?

What you can do depends upon how much pain you have and upon your exact surgery. Generally it is all right for you to move your shoulder under your own power to reach your mouth, to eat, to hold a newspaper and to reach out in front of you. Generally there is nothing wrong with using the arm at table height and we recommend that you lift nothing heavier than a coffee cup. If you find that you can lift your arm above shoulder level without pain, then it is all right to do this. However, you should avoid the temptation to start using the arm a lot. This can get the shoulder inflamed and prolong the recovery. We generally recommend that after these operations it is best to not push activity with the shoulder in the first four weeks. It is more important that you let the shoulder recover from the surgery than it is that you begin pushing it very hard.

When should I start therapy?

Not everyone after these operations needs therapy. The main reason to have therapy is to help you regain your motion in the first four to six weeks after surgery. Some patients have a rapid return of motion after these operations, but if you do not then you shouldn't worry. If therapy

is decided to be helpful in your case, we typically recommend that it begin shortly after your first postoperative visit.

When can I drive?

It is generally good policy not to drive your car until you can drive normally. There are several reasons for this. First, you do not want to be in a situation where you need to control the wheel but cannot because of your shoulder. That could lead to a bad problem for you or for someone else. Secondly, the last thing you need is to be in an accident and injure your shoulder or damage the repair. There are no hard and fast rules as to when you should or should not drive, but generally it takes at least two to three weeks after this surgery before patients can drive well.

What about work?

The answer to this question depends entirely upon what you do for a living. The same is true for activities that you do for fun or exercise. If you do "white collar work" or work which involves paperwork or working at desktop level, then we recommend that you return to work around one to two weeks after surgery. If you do work which requires any lifting at all, such as over a few pounds, then we recommend that you wait longer. Most physicians recommend that you not do any lifting over a few pounds in the first three months. Heavy laborers may take longer to have normal function and ability to lift overhead.

What is next?

Usually the physician does not need to see you for another six to eight weeks. You should do your stretching exercises at least once per day and you should ice afterwards for at least twenty minutes. It is helpful to use the ice device after any exercising for awhile (an hour or two if you have the time). Strengthening exercises should be done at least three times per week and you should ice afterwards. Your physical therapist will help guide you on how much weight to use. If you do not have a return appointment to see the physician, then contact the office for an appointment.