After Your Shoulder Surgery

Information for people having shoulder surgery at Interior Health facilities
Introduction

This booklet is for people having shoulder surgery or recovering from a shoulder injury. It will give you the information you need to plan for, and recover from, your surgery or injury.

For general instructions on how to prepare for your surgery, please refer to the Preparing for Your Surgery booklet or Preparing for Your Daycare Surgery handout, available from your hospital Preadmission Clinic or your surgeon’s office.

*IMPORTANT: The information in this booklet is intended solely for the person to whom it was given by the health care team. It does not replace the advice or directions provided to you by your surgeon.
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Planning for recovery

Home set-up

If your shoulder surgery is planned, it is helpful to set up your home BEFORE surgery. This will allow you to easily move around your home after surgery, reduce the risk of falls, and will make it easier to do things with one hand.

If you have had an unexpected injury and/or surgery, the information below will still be helpful once you get home.

- 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 and/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.). These services are not covered by the Medical Services Plan and will need to be paid by you.
- Move often 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 food/meal delivery services are available in many areas.
- Keep an icepack in your freezer to use on your shoulder to help reduce swelling after surgery (see pages 9 & 13).
- Have a thermometer at home to check your temperature after surgery.
- Use a non-slip bathmat both inside and outside the bathtub or shower.
- Do NOT use towel racks or toilet paper holders to assist you to stand or sit. Arrange to have proper hand rails installed. These are available at medical supply stores or loan cupboards (see page 4).
- Wear Velcro closure shoes or slip-on shoes with enclosed heels. You will not be able to tie shoelaces with your affected arm (see page 8).
- Wear pull-on, elastic waist pants. Button up shirts or cardigans are easiest to put on (see pages 5–7).
- Extra pillows to help you get comfortable for sleep.

Arrange for equipment

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

- Tub transfer bench
• Hand-held shower hose
• Shower chair for walk in shower
• Non-slip mat
• Long-handled sponge
• Removable tub clamp OR installed grab bars
• Raised toilet seat with toilet safety frame
• Bed assist rail

Note: Do not push or pull with your operated/injured arm when using these items until your surgeon or physiotherapist tells you that you can.

To get dressed, the following may be helpful:
• 26” Long-handled “reacher”
• 24” Long-handled shoehorn
• Sock aid
• Elastic shoelaces for lace up shoes

Where to get equipment

| Red Cross Loan Cupboards | • 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. 
| www.redcross.ca  
| Toll Free: 1.800.565.8000  
| or check local listings for area phone number. |

| Medical Supply Stores | • See yellow page listings or go online 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 |

| Government Agencies | • Veterans Affairs Canada (VAC)  
| | www.vac-acc.gc.ca  
| | 1.866.522.2122 |

| Friends/Family | • 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/injured 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/injured arm when putting clothes on. When removing clothes, start with the non-operated/uninjured 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. Allow your arm to dangle. Loosen and relax the shoulder muscles. Place your injured/operated hand and arm into the sleeve and slowly draw the sleeve up past your elbow.

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

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

5. To straighten out the shirt, lean forward, allow your shoulder muscles to relax and loosen, 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/injured 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/injured arm.

3. Move the sleeve opening for the operated/injured arm between your knees and open it as large as possible.
4. Use your non-operated/uninjured hand to grab your operated/injured arm and place the operated/injured hand into the sleeve opening. Make sure your fingers do not get caught in the sleeve.

Allow your shoulder muscles to relax and loosen, lean forward and let your injured/operated arm drop down into the sleeve.

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

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

7. Pull the shirt on the operated/injured side up to the shoulder as much as you can.

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

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

10. Use your non-operated/uninjured hand and push the bulk of the shirt material over your operated/injured 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/uninjured 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/uninjured arm out of the sleeve.

4. Use your non-operated/uninjured hand to pull the other sleeve off the operated/injured 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/uninjured 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.

Toileting

- Use a raised toilet seat or a grab-bar on the non-operated/uninjured 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 surgery/injury 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:

- Move up to, but NOT INTO PAIN!
- Some patients find cold packs help with comfort and ice may be applied for 10–15 minutes, 4 to 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.
Depending on your surgeon, physiotherapy usually begins 2–6 weeks after surgery. **Do not begin any exercises that have not been approved by your doctor or physiotherapist.**

### Going home

#### Care of your incision

- If you have had surgery, 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 a clear, reddish, yellow drainage on the dressing.

- Steri-strips often peel off on their own in about 10 days. If they don’t, leave them until you see your surgeon.

- Change your dressing in 48 hours after you leave the hospital and every other day until you see the surgeon.

- When changing the dressing, follow these instructions:
  
  - Wash your hands well before and after changing or removing dressings or touching your incision.
  
  - Use an adhesive gauze strip bandage (e.g. Mepore®).
  
  - Keep the surgical area clean and dry at all times.

- Your surgeon will remove the staples or stitches 5–14 days after surgery. Do not get your incision wet for 24 hours after removal. After that, you may shower/bath daily.

- 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.

- 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 to allow the arm to rest, keep shoulder muscles loose and relaxed, and provide comfort. When seated, it is important to loosen the strap around your neck and allow your arm to rest comfortably on your lap. This will help to avoid neck discomfort and or pain from the sling.

- **Unless told otherwise by your surgeon, wear your arm sling at all times for the first 2 weeks (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/injured 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/uninjured arm, gently bring the sling over your hand and forearm until your elbow fits snuggly 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/injured 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.

Bathing

• When allowed to shower or bathe, follow these instructions:
  ➢ Wash your hands and remove any dressing before showering. It is okay to get the incision wet and to wash the area gently.
  ➢ Avoid aiming the showerhead at your incision.
  ➢ After showering, check your incision to ensure that there are no signs of infection. Gently pat the incision with a clean towel. Do not rub the area.
  ➢ Apply a new dressing.
• Keep your armpit clean and dry. A folded dry face cloth works well.
Activity

These are general guidelines only. In order for your shoulder to heal the best it can you must follow your doctor’s specific orders.

- Follow the exercises given to you by your doctor and/or physiotherapist.
- Make sure to follow any movement precautions for your shoulder or arm told to you by your doctor or physiotherapist.
- Avoid lifting anything with your operated/injured arm until your doctor tells you it is okay (usually 6–8 weeks).
- Use a cane in your non-operated/uninjured hand (no weight-bearing or leaning through your operated/injured arm) if required for balance. You may not use a walker or crutches.
- As it is not possible to elevate the shoulder, swelling into the elbow, forearm, and hand are common.
- Gradually increase your mobility as you are able. Short walks will help to promote lung function, circulation and will help you to feel better overall.
- 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.
- Making arrangements with your employer before your surgery will be helpful for both you and your employer.

Driving

- You are not fit to 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 narcotics 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 the event 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 narcotic painkillers e.g. 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.
Elimination

- Avoid constipation and forceful straining during voiding and bowel movements.
- Increasing fluids, activity, and fibre in the diet can help decrease the chance of constipation.
- Sometimes a mild laxative may be needed. Ask your pharmacist or doctor to recommend one.

Medications

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

Pain control

- Take pain medicine as directed. It is better to take medicine BEFORE the pain is severe, especially in the first 3 days after surgery.
- Pain from most shoulder surgeries/injuries may be controlled using a combination of medications. These may include extra strength acetaminophen (Tylenol®) and narcotics (morphine, hydromorphone, and codeine). Please follow the directions from your doctor or pharmacist. Please also check with your surgeon before taking any anti-inflammatories.
- When taking pain medication, you may 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 altogether.
- Most people have less and less pain over the next 6 to 12 weeks.
- If your pain becomes increasingly worse or if you have pain in a new 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 medicine 1 or 2 hours before doing any of these activities in the first weeks after surgery/injury.
- Ice 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 letters, 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 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 2 days or more
• Persistent nausea or vomiting
• Shortness of breath
• Swollen leg(s) or achy and red calves

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:
• Be careful to avoid infections (sinus, chest, dental, skin, etc.).
• 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 may be put on antibiotics to prevent infection from moving through your bloodstream to your new joint. Preventative antibiotics should be used by all patients having dental work for a 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. A follow-up appointment 5–14 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.
• You can see a Physiotherapist at:
  ➢ The hospital or at a private physiotherapy clinic of your choice.
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

BC Nurseline
For non-emergency health information, dial 811 (or 711 for deaf and hearing-impaired) from anywhere in BC to talk to a Nurse any hour of the day or night, 7 days a week.

Canadian Orthopaedic Association
www.coa-aco.org

Canadian Orthopaedic Foundation
www.canorth.org/en/patienteducation
and Ortho Connect
www.canorth.org

BC Dial-a-Dietitian
For non-emergency health information, dial 811 (or 711 for deaf and hearing-impaired) from anywhere in BC to talk get connected with a Dietitian.
www.dialadietitian.org

HealthLinkBC
For non-emergency health information, dial 811 (or 711 for deaf and hearing-impaired) from anywhere in BC to talk to a Nurse, Pharmacist or Dietitian. Translation services are available in over 130 languages on request.
www.healthlinkbc.ca

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
Email: oasis@vch.ca
Phone: 604.875.4257

Ortho Connect
A program through the Canadian Orthopaedic Foundation that connects people who have had joint replacement surgery with a volunteer who has gone through a similar surgery.
www.canorth.org (click on “patient resources”)
or phone 1.800.461.3639
or email mailbox@canorth.org

Physiotherapy Association of British Columbia (PABC)
– to find a Physiotherapist in your area
www.bcphysio.org

Surgical or Orthopaedic Information
American Academy of Orthopaedic Surgeons
http://orthoinfo.aaos.org

Transportation
HandyDART
www.transitbc.com
Provided by local bus services throughout BC—check your local listings for phone numbers

TAP – Travel Assistance Program
www.health.gov.bc.ca/msp/mtapp/tap_patient.html
Phone: 250.952.1587
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