

Labral Repair Postoperative Instructions

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ABOUT YOUR SURGERY

- Thank you for entrusting me with your surgical care. Please feel free to contact my office with any questions or concerns that you may have during your postoperative recovery, and I will make sure that all your concerns are adequately addressed.
- With this surgery we repaired the glenoid labrum to decrease pain and restore stability to your shoulder.

POSTOPERATIVE OFFICE VISIT

- You should have an office visit scheduled within 10-14 days after your surgery.

MEDICATIONS

- Prescriptions for pain and other applicable medication will be sent to your pharmacy before your procedure.

Pain Medication

- *The goal of the multimodal pain regimen is to minimize the amount of narcotic (opioid) medications that you require for postoperative pain control.*
- You should discuss these medications with your primary care doctor to make sure there are no interactions with any other medications that you are taking, and that your kidneys and/or liver are healthy enough for their use.
- Always eat prior to taking medication. Do not take medication on an empty stomach.
- If you had a regional nerve block, start taking pain medication when you feel pins and needles. Do not wait until you have pain. If the block has not worn off before you go to sleep, take a dose of pain medication anyway.
- If you don't have a bowel movement by the third day, take **Colace (Docusate)** and **Senna** over the counter as per package instructions.

Anticoagulation (Blood Thinners)

- You will receive a prescription for **Aspirin 325 mg (#21 total) to be taken once daily** with food for prophylaxis against blood clots unless you have a contraindication to this medication.
- Ambulation, foot/hand pumps, and movement of the surgical site within the confines of the weightbearing and motion restrictions provided are additional ways to reduce the occurrence of blood clots after surgery.

- Seek emergency attention if you develop increasing leg pain, swelling that does not decrease with elevation of the lower extremity, enlargement of veins near the skin, reddish skin discoloration, or skin that is warm to touch.

DRESSING CHANGES, WOUND CARE, AND BATHING

- You may remove your surgical dressings 72 hours after surgery but will need to re-apply new dressings (waterproof bandaids work well). There may be a small amount of clear or reddish drainage - this is normal. Patients who are on blood thinners may expect increased drainage. If drainage continues for 3 days following surgery, please contact our office.
- Please keep your wounds clean and dry. You may shower with waterproof bandaids over the wounds. Please do not apply any lotions, creams, or ointments directly to the incisions until 30 days after surgery. After your sutures are removed at your first postoperative visit, you may get your incisions wet and they no longer need to be covered.
- ***AVOID STEAM ROOMS, SWIMMING POOLS, AND TUBS FOR A FULL 4 WEEKS AFTER THE DATE OF YOUR SURGERY TO AVOID INFECTION.***

SWELLING / INFLAMMATION CONTROL

- Icing the surgical site is very important following surgery. In most cases you will be offered a cryotherapy unit to use after surgery. This unit is a cooler which circulates cold water through a cuff. This device may be left on the surgical site for extended periods of time. There is a rental fee to use this device, or it may be purchased directly. For any questions regarding this equipment please call East Coast Orthotics at 212-342-0846.
- If you choose to use regular ice packs, please limit icing to 20-minute sessions every 2-3 hours at most to avoid any skin problems.
- Icing should be continued for the first several weeks following surgery.
- It is normal to have swelling and/or bruising around your incisions, or about the surgical extremity after surgery. This will gradually resolve after surgery.
- ***PROLONGED FEVER OVER 102 DEGREES, THICK DRAINAGE, CHEST PAIN, SHORTNESS OF BREATH, OR CALF PAIN SHOULD BE REPORTED IMMEDIATELY. PLEASE CALL IF YOU EXPERIENCE THESE SYMPTOMS.***

WEIGHTBEARING STATUS / IMMOBILIZATION

- You will be in a sling when leaving the operating room. The sling is to remain on while walking and sleeping. It may be removed for hygiene, independent exercise, and physical therapy.

REHABILITATION / PHYSICAL THERAPY

- Physical therapy will typically begin 1-2 weeks after surgery. Therapy can be performed at any facility you like.
- A specific physical therapy protocol will be provided in your postoperative folder.

SLEEPING TIPS

- Unfortunately, it is often difficult to get quality sleep following shoulder surgery of any kind. Many patients do better in a recliner or propped up on pillows. It may be best to take pain medicine shortly before bed, as these medicines typically have a sedating effect.

DRIVING AFTER SURGERY

- The ability for someone to resume driving after surgery is seldom a medical question, but more often a legal question. Driving with any form of a brace or sling on may be interpreted as driving while impaired. It is the responsibility of all licensed drivers to always drive safely no matter what their permanent or temporary impairment may be.

WORK AFTER SURGERY

- Discussions of return to work will depend on the type of work that you perform, and the immediacy of needs to return. This discussion will be had preoperatively and at each visit postoperatively to help you, the patient, to get back to what you need to be doing in a timely fashion, while not compromising your surgical outcome.

DIET AFTER SURGERY

- A balanced, healthy diet high in proteins is most valuable for the body to utilize during the healing process after surgery. There are otherwise no formal restrictions on your diet after surgery.

OTHER COMMENTS

- We recommend abstaining from alcohol or tobacco use in the postoperative period. This is for general health reasons, as combination with the prescribed medications can be dangerous, but also to prevent adversely affecting the body's healing response to your surgery.