

A Patient's Guide to Outpatient Shoulder Surgery



Animas
Surgical Hospital
Personal care. Better results.

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INTRODUCTION

As a shoulder pain sufferer, you're undoubtedly used to making decisions dictated by limitations. The pain from your condition can interfere with just about every aspect of your life — exercising, working, enjoying time with family and friends, and even getting a full night of sleep.

Now that you've decided on having shoulder surgery, this guidebook will cover what to expect at each step of the surgical process so that you have the information you need to proceed with confidence.

Any surgery is a big step. Medical professionals expect you to have questions, concerns, hopes and expectations. The information contained within addresses common issues and guidelines for care. The following information is meant as a general guide, and your individual progress and course may vary.

Please read this material carefully as you prepare for surgery. You may find it helpful to check off items completed and jot down questions about things you're not sure of. Make sure to go over pertinent information with your care team (doctor, therapists and nurses) as well. The more you know, the better prepared you'll be to take charge of your comfort and mobility again.

With compassion and respect,

Animas Surgical Hospital Physicians and Staff

ABOUT ANIMAS SURGICAL HOSPITAL

On behalf of the staff and physicians at Animas Surgical Hospital, we would like to welcome you to our facility and express our commitment to providing exceptional, safe patient care and compassionate service to all our patients and their families. Thank you for choosing Animas Surgical Hospital for your healthcare needs.

Since 2004, Animas Surgical Hospital has been delivering surgical excellence. We're proud to be owned and operated by local physicians who live and work in the Durango area and who are responsive to the health needs of the community. Because we're physician-owned, our experienced surgeons are able to advocate for new technologies and procedures. Our low patient-to-nurse ratios ensure near-zero infection rates and high rates of patient satisfaction. In 2017, 92% of patients polled stated that they would definitely recommend Animas Surgical Hospital. (That's 22 percentage points higher than the national average!)

Important Contact Information

Animas Surgical Hospital is a full acute-care hospital. You can find many of the same services offered at bigger facilities, but in a convenient location close to home.

Animas Surgical Hospital Front Desk	Call to be transferred anywhere in the hospital	575 Rivergate Lane, Durango	970-247-3537
Emergency Room	24/7 emergency services	575 Rivergate Lane, Durango	970-385-2364
Urgent Care	Walk-in treatment for minor injuries and illnesses	450 S. Camino del Rio / Hwy 550, Durango	970-385-2388
Occupational Medicine	Fast, convenient care for those hurt on the job	450 S. Camino del Rio / Hwy 550, Durango	970-385-2390
Diagnostic Imaging	X-ray, MRI, CT, Ultra-sound, DEXA, and more	575 Rivergate Lane, Durango	970-385-2375
Internal Medicine	Primary care for adults	575 Rivergate Lane, Suite 204, Durango	970-403-1340



MEET YOUR CARE TEAM

At Animas Surgical Hospital, you will have an entire team dedicated to ensuring your success and making sure that you are as comfortable as possible during your stay. Please do not hesitate at any point to ask questions.

Orthopedic Surgeon

Your surgeon is the leader of your healthcare team. Our surgeons are board-certified and trained in orthopedic shoulder surgery.

Physician Assistant

Your physician assistant (PA-C) will assist your surgeon in the operating room and with pre and post-operative care. Your surgeon and physician assistant will work closely with you from your first visit throughout your recovery.

Anesthesiologist

Your anesthesiologist will review your medical record and decide on the best plan for surgical anesthesia. Most often, they will be providing you with a “regional block” to numb your shoulder, arm, and hand. This block will be done in the pre-operative unit. They will explain every step of the procedure to numb the nerves that would cause you pain after surgery. You will also undergo general anesthesia in the operating room and wake up in recovery with your arm in a shoulder sling and still numb. The numbness will slowly decrease over time, typically 10-14 hours.

Pre-operative Nurse

Prior to surgery, your Pre-operative nurse will escort you to the Pre-operative department and begin to prepare you for surgery. Remember, no make-up, no jewelry, and no lotions on your body. After about 30 minutes, your family member/caregiver will be able to accompany you in the Pre-operative Department. The nurses will interview you clarify your name, date of birth, surgery to be performed, surgical site, drug allergies, medications, last time you had anything to eat or drink, history of infectious diseases, recent illnesses, open wounds, complications with anesthesia, and advance directives. They will start an intravenous line for any medications your doctor has ordered for you. The pre-operative nurses ensure you have a safe ride home from the hospital. You will not be able to drive after surgery and must arrange a ride home. After all your preparation is completed you will proceed to the operating room with the anesthesiologist and your operating room nurse by your side.

Post-operative Nurse

After surgery you will recover in the Post Anesthesia Care Unit (PACU). The Post-operative nurses are intensively trained in the recovery of patients following surgery. They will monitor your vital signs, control your pain and assess your surgical site. Once you are comfortable and alert, they will move you to a different area in the PACU unit termed Phase 2. Your caregiver/family member will be able to sit with you in the Phase 2 area till you are ready for discharge home. Discharge instructions, prescribed medications and a follow-up doctor appointment will be given to you at this time. You will have the arm sling on at this point and will be shown how to take the sling on and off. The nurses will ensure you understand all information given to you prior to discharge.

Hospital Staff

There are many specialists whose services you may require or request including physical therapists, dietitians, lab, x-ray technicians, and housekeeping staff. All members of the team will work to make your hospital stay a success.

PREPARING FOR SURGERY

Before Surgery:

Choose a Caregiver/Coach:

This can be a friend, loved one, or family member that should be available to stay day and night with you after surgery. They will be assisting you with daily activities and transportation needs. This is a vital part of your safety and recovery. Once you decide on your caregiver, refer them to the “Caregivers Guidebook” for education on their role in your recovery. The guide is included in this surgical packet.

Prepare your Home:

Having your home ready for your return is a large part of a safe recovery. Refer to this guidebook’s section on “Preparing your Home.”

Stop Smoking:

Studies have shown that using nicotine products inhibits bone and soft tissue healing and delays healing. Being nicotine free helps increase a successful outcome. Be honest with your surgeon about smoking any products. If you need support to stop smoking, visit the American Heart Association website for tips on how to stop smoking, or ask your primary care provider.

Medications to Stop:

Anti-inflammatory medicines such as; ibuprofen, Naproxen, Celebrex, and Advil, need to be stopped 3 days prior to surgery. Anti-inflammatory medications slow the clotting time of your blood and will increase bleeding.

If you are on blood thinners such as Coumadin, Eliquis, Xarelto, or Plavix, these will need to be stopped prior to surgery once approved by the physician managing these medications. It is very important to know when to stop and resume any prescription blood thinners. Contact your prescribing physician for instructions on medication management. All medication information will need to be in your chart for your shoulder surgeon to review. Herbal remedies such as St. John’s Wort, Ginkgo Biloba, Ginseng, and diet aides can also increase bleeding. These must be stopped 2 weeks prior to surgery. Ask your surgeon when it is safe for you to resume any herbal supplements.



Prepare Your Medical Power of Attorney, Living Will, CPR directive:

If you have these documents prepared, bring them to the hospital for your medical record. If you would like more information on them there are multiple web based sites, search in your states publications for “Your Right to Make Healthcare Decisions”. Here are just two of many sites with information on the subject.

Colorado link; coloradoadvancedirectives.com/wp-content/uploads/2014/07/YRTMHCD
New Mexico link; https://www.aarp.org/.../caregiving/2011_01/ad/NewMexico.pdf

After Surgery

Shoulder Sling:

After shoulder surgery you will be required to wear a supportive shoulder sling for a few weeks. The sling will be fitted and placed on you immediately following surgery. The length of time you will be wearing the sling depends on your particular surgery, generally 4-6 weeks. You will need to wear this sling as directed by your surgeon or PA-C, taking it off to shower and perform your shoulder physical therapy exercises only.

Walking after Surgery:

It is important you walk after surgery. Wear shoes with good traction. High heeled boots or shoes are not recommended. Have someone walk with you at first, and carry a cell phone in case of emergency. Walking helps get a good blood supply to your surgical area and helps prevent blood clots and pneumonia.

Travel after Surgery:

Discuss all travel plans with your surgeon. Keep in mind that frequent change of positions is necessary to decrease the risk of blood clots, especially if traveling by aircraft.

Traveling by car as a passenger can be done at any time after your surgery. When driving more than an hour in the car, stop every 30 minutes, get out and walk around for a few minutes to decrease the risk of blood clots in your legs.

Driving after Surgery:

Your surgeon will determine when you are safe to drive. This will depend on the extent of the surgery. It is recommended that you avoid driving while wearing a sling. Do not drive if you are taking medications that impair your ability to operate a vehicle safely. You may need to arrange a driver for the first few weeks.

Returning to Work:

Since work activities vary greatly with each individual, discuss the return to work or increasing activities with your surgeon. It is important to plan the returning to activities slowly and very gradually as you progress through your recovery. If you become tired or are having increased pain, you may be pushing yourself too fast, and you will need to back off on the work intensity, or work hours.

PREPARING YOUR HOME

- Always keep a **phone** nearby in case of emergency.
- As previously mentioned, you should find **someone who will be available to help you** for about one week after your surgery. This may be a responsible family member, friend or spouse. If you do not have a plan for someone to stay with you, you will need to discuss this with your surgeon.
- You may need to **rearrange furniture** so there is a clear path to maneuver while wearing a shoulder sling. This also includes outside your home with carports or narrow access areas in garages
- Good lighting is very important. **Install nightlights** in bathrooms, bedrooms, kitchens, stairwells, and hallways.
- **Remove any objects that might cause you to trip**, including loose throw rugs and extension cords.
- Pets may become very excited to see you and trip or knock you over. Have your caregiver **keep pets in a different area** till you are settled at home. Be aware of where pets sleep as to not cause you to fall. Remember, you may need to arrange for someone to care for pets while you are at the hospital.
- To prepare your kitchen, you may want to **prepare and freeze some nutritious meals** in advance. If you are having surgery on your dominant arm, eating with your non-dominant arm may cause some frustration. Start with foods that will stick to the utensils, for example; oatmeal, mashed potatoes, tuna salad, or thick stews. Softer foods that do not require cutting into small pieces are more appropriate at first. Crock pot chicken, chili, and penne pasta are examples of easy to eat meals that do not require cutting. Frozen vegetables and pre-made salads will also help avoid cutting foods into bite sized pieces. Arrange pots and pans and your dishes so they are easy to access with one arm.
- **Prep your bathroom.** Shower or bath rails can reduce the risk of a fall in the bath. A shower caddy will help to keep soaps and shampoo within safe reach, eye level is preferred. A hand held shower head and a long handled sponge can be extremely helpful. Place toilet paper rolls where they can be easily reached. Dental stick flossers, pump style toothpaste containers, and alcohol-based hand wash gels, are some examples of hygiene products that are easy to use with one arm. You may consider an elevated toilet seat.
- **A comfortable reclining chair is recommended to rest** (even sleep). Most patients find it much more comfortable than sleeping with their arm sling on while in a bed. If sleeping in a recliner, place the chair where there is adequate lighting, place snacks and water within reach. Have your cell phone available to phone your caregiver if they are sleeping in a different room and you need assistance.
- Always **keep your pain medicine available** and write down when you take each dose.

- **Plan to have someone help you with basic chores.** You may need help doing housework, laundry, shoveling snow, paying bills, getting groceries, or mail. Do not be reluctant to ask for assistance!
- Stairways can be dangerous. You may want to **rearrange items to avoid frequent trips up and down stairs.** Ideally your bathroom, sleeping area, and kitchen should be situated on the same floor.
- **Clothing should be loose enough to fit comfortably under (and over) your shoulder sling.** At first, clothing that buttons in the front is easier to don and doff. When dressing, let your surgical arm gently dangle away from you as you lean forward and carefully put your surgical arm through the sleeve first, followed by your non-operated arm, then your shoulder sling. To remove your shirt, reverse the process, take off a sleeve from your non-operated arm first, and then gently slip the shirt off your operative arm.
- Cotton will absorb moisture; slings tend to cause sweating under them. **Consider placing a hand cloth in your armpit to prevent rash.** Sweat pants and elastic wadded pants are some examples of clothing that are both easy to put on and take off instead of pants that require zipping.
- Coats or clothing that are **a size or two larger in order to fit over your shoulder sling** may be required and can be purchased at thrift stores.
- **Shoes should be sturdy,** with low heels and easy to don and doff. Velcro closures or shoes that can be slipped on your foot are acceptable attire.
- **Prepare ice packs.** Placing bags of ice on your shoulder will help with pain. You must never place ice directly on your skin. Use a clean pillow case, towel or tee-shirt to place ice bags in. Ice should only remain on your operated site for 20 minutes out of each hour. Do not use ice if you have cold hypersensitivity, numbness in the area or poor circulation. Stop icing if the skin becomes numb to a light touch. You may use a bag of frozen peas or alcohol based cold packs instead of ice, but they must also be covered in material and not placed directly on the skin.
- **Take time to pay attention to what you normally would do with both hands without thinking of it.** Practice eating, toileting, showering, cooking, and even writing with one hand. Plan more time to do your activities of daily living, and do not sacrifice your surgery by lifting something that exceeds your weight limit. It is just not worth it! Now you are well on your way to a successful and safe recovery.

HELPFUL POST-OPERATIVE NUTRITION GUIDELINES

Good nutrition can help support your healing after surgery. Areas in which appropriate nutrition may aid in post-operative healing/comfort include: meeting your protein needs, relieving constipation, appropriate food textures, eating adequate, specific vitamins and minerals and reducing inflammation. Taking extra time before your surgery to prepare or plan for good nutrition after surgery will likely prove beneficial. Consider making and freezing foods that can be reheated, creating meal/snack plans and grocery shopping pre-operatively. Also, if possible, be sure you have the help you need when you arrive home. Continue with these recommendations until your surgical site is completely healed.

Protein: Eat protein 3 or more times a day

- Protein is especially important following surgery as it helps repair damaged body tissue and form antibodies to fight infections.
- Good, healthy sources include: fish, seafood, lean poultry, nut and seeds, legumes (beans), tofu, eggs and red meat.
- Dairy foods also have good amounts of protein but can be cause constipation and so should be eaten in moderation.

Constipation: Commonly occurs in post-surgical patients due to narcotic pain medications and inactivity.

Try these tricks to **decrease risk** for constipation **(do this)**:

- Follow your surgeon's recommendations and the "Preventing Constipation" section of this guidebook.
- Staying hydrated is top priority in avoiding constipation. Aim for at least 60-90 ounces per day or more if you are a larger person.
- A high fiber diet is also very helpful in combating constipation. Eat whole foods (an apple rather than apple juice) and whole grains rather than processed grains (brown rice rather than white rice). Supplement with powdered fiber drink, if needed (Metamucil).
- Drinking 4-8 oz of prune juice can often stimulate a bowel movement.
- Walking can help your bowel move and therefore decrease risk of constipation.

These foods are associated with an **increased risk for constipation** and should be ***avoided*** or eaten in limited quantities;

- Milk, cheese, and dairy products-- a little yogurt is acceptable.
- Refined/processed foods- such as white bread, white rice, packaged high calorie snack foods (such as potato chips, cookies, and pork rinds), and boxed meal mixes.
- Large amounts of red meat, beef.
- Sweets- including pastries, candies, cakes and other sugary foods.

Inflammation: These foods are associated with a reduction in inflammation and pain after surgery and *should* be included in your diet.

- Fatty fish such as salmon and trout. A fish oil supplement (1000-2000mg a day) may also aid in reducing inflammation.
- Walnuts and almonds, dark fruits such as all berries, eggplant and grapes, onions, garlic and leafy green vegetables.
- Soy products such as tofu and edamame, extra virgin olive oil, flax seeds, flax meal, and green and black tea (herbal teas have not shown to have the same anti-inflammatory benefits).
- Be sure to avoid any foods you know that you are sensitive too. For example, if you are lactose intolerant, even if your normal reaction is mild, avoid it while you are recovering.





Vitamins, minerals & supplements:

Many vitamins and minerals can help reduce inflammation, as well as accelerate wound healing after surgery. It is recommended to obtain these from food rather than supplement.

- **Vitamin A** - Stimulates the immune response and important in skin healing. Good sources of Vitamin A include carrots, leafy greens, red bell pepper, sweet potato, and cantaloupe.
- **Vitamin C** - Is associated with wound healing. It aids in formation of collagen in bones, cartilage, muscle, and blood vessels. Good sources include kiwi, oranges, tomatoes, strawberries, broccoli, bell peppers, and potatoes.
- **Vitamin D** - Is an essential nutrient in the formation, maintenance, and repair of bones. Good sources include fortified milk, egg yolk, salmon, tuna, and direct exposure of skin to sunlight (10 minutes, two times per week).
- **Calcium** - Is an essential mineral for bone repair and soft tissue healing, proper blood clotting and muscle contraction. Milk and milk products, as well as dark green leafy vegetables are good sources.
- **Zinc** - It may accelerate wound healing in patients following surgery. Primary sources include oysters, lean meats, fish, poultry, legumes, whole grain breads and cereals.
- **Probiotics** - eating foods with live cultures daily (yogurt, sour kraut, kefir, kim chee, etc.) or taking a daily probiotic supplement is encouraged post-operatively for 2-3 weeks, specifically after antibiotics are finished.

Eat well and make good choices in supporting your recovery!

PREVENTING CONSTIPATION

Opioid pain medication can be VERY constipating! Please consider taking over-the-counter laxatives twice a day in order to have regular bowel movements while taking narcotic medications.

Your doctors recommend that you take:

- Colace (dulcolax) twice a day

If you are still constipated, take these medications;

- Senokot-S two tabs in the morning and 2 tabs in the evening.
- 1 capful (17 gm.) of polyethylene glycol (Miralax) dissolved in a glass of water or juice twice daily.

If you still have constipation; take more Miralax until you have a soft stool. You can't overdose, it will give you diarrhea.

If you start to get a loose stool as you take less opioid pain medication, then decrease or stop the polyethylene glycol (Miralax), and stop the others one by one as you are having more regular bowel movements.

Other treatments for constipation include:

- Prune juice
- Smooth Move Tea
- Psyllium husk fiber (Metamucil, etc.).
- Flax seed (1 tsp. in a glass of water or juice followed by plenty of water).
- Walking also encourages bowels to move and is encouraged.

You may prefer a more natural approach, but often the opioid pain medicines are so potent that the natural approach alone is inadequate.

**Call your physician if you do not have
a bowel movement in three days.**

MEDICATION

ASK 3, TEACH 3

Animas Surgical Hospital encourages patients and their family or caregivers to become engaged in the medication communication process as partners.

As a patient, you and your family or care providers should ask these three questions every time you receive a medication in any hospital:

ASK 3:

1. What is the name of the medication?
2. Why do I need to take it?
3. What are the possible side effects of this medication?

Your nurse will answer these questions in a “teach 3” format:

TEACH 3:

1. The name of this medication is.....
2. This medication was prescribed for.....
3. The potential side effects of this medication are.....

If you have any question about your medications, ask your nurse, doctor or pharmacist for clarification.

INCISION CARE

You will receive specific instructions about dressing and incision care on your discharge instructions from the hospital. Please make sure you understand how to care for your incision prior to leaving for home.

An incision should be kept clean and dry at all times to help promote healing and reduce the risk of infection. Follow the rules explained on proper icing technique. Unless your surgeon tells you to, never apply any creams or lotions to the incision. You should also avoid wearing tight clothing that will rub against the incision while it is healing. Dressing care will be described in more detail with your discharge instructions. Please ask your nurse about such care if you have any questions prior to discharge from the hospital.

RESTRICTIONS AFTER SURGERY

Always follow your discharge instructions given to you following your surgery.

Discharge instructions vary between the extent of surgery you had. Below are some general rules but always follow your specific discharge instruction given to you following your surgery. If you do not understand these instructions, call your surgeons office for clarification.

- Do not smoke.
- Do not drink alcohol for 24 hours after surgery OR if still taking prescription pain medication.
- Do not drive while on pain medications and not until your surgeon releases you to do so.
- Walk daily to improve circulation, relieve stiffness, and avoid blood clots.
- Change positions frequently, do not sit for a long period of time.
- Keep incision clean and dry at all times.
- No baths, swimming pools, or hot tubs until cleared by your surgeon.
- Do not resume anti-inflammatory medication (ibuprofen, Aleve, Motrin) until approved by your surgeon.

Depending on your situation, your surgeon may also prescribe you to:

- Wear compression stockings for 7 days or till your activity has increased.
- Keep your shoulder sling on at all times, removing it for bathing and exercises only.
- Do not bear any weight through the operated extremity. This means not to grasp things or hold things your hand on the operated side till instructed to do so.
- No reaching overhead.

WHAT ISN'T NORMAL?

Report any of the following concerns to your surgeon:

- Any difficulty with breathing
- Difficulty swallowing (You may have some pain swallowing which should decrease as you continue to drink or eat. If you are unable to swallow report to your surgeon.)
- Increased drainage from your incision
- Increased arm pain or weakness
- Increased swelling or redness around the incision site
- Fever or chills
- Nausea or vomiting
- Prolonged constipation
- Calf pain
- **Chest pain or shortness of breath is considered a medical emergency. Seek immediate medical attention.**

You will be contacted by phone from Animas Surgical to check on your recovery process. Usually this phone call is made the following day after you are discharged from the hospital.



FREQUENTLY ASKED QUESTIONS

Will I need to purchase any equipment prior to my surgery?

You will not need to purchase any special equipment. However, if you would like to use a special cooler that is designed to pump ice cold water through a pad that can be placed over your shoulder, you may. These cold water coolers are available through your surgeon's office. If you wish to borrow a cooler from a friend, you will still be asked to purchase the pad that is used on your incision area. This is to reduce the possibility of infection.

Further suggestions on items that will help you around your home are mentioned in the section of this manual, "preparing your home."

How long is my hospital stay?

Depending on procedure you will go home same day or spend one night in the hospital. You must plan to have a responsible person to take you home and remain with you while freshly recovering from your surgery.

How long will I be on pain medication?

Most patients take pain medication for approximately 3-10 days postoperatively. However, you may need to take some pain medicine prior to your physical therapy appointments.

When can I drive?

Length of time recommended not to drive depends on your procedure. Your surgeon will inform you of when it is safe to drive or operate machinery.

When will I start physical therapy?

Following surgery you will be given instructions on when and how to perform gentle home-based exercise to minimize stiffness. You will then begin going to a physical therapist's office about one to two weeks after surgery. Again, this varies depending on the procedure performed. Your surgeon will inform you when you will start going to a therapist and he will give you a specific prescription for your physical therapy. Remember, you will need to arrange transportation initially.

When can I get in a swimming pool or hot tub?

You are not to immerse yourself in a pool or hot tub until you have specific instructions from the surgeon.

When is my post-operative appointment?

Your post-operative appointment will be arranged usually during the scheduling process. Remember, it is not recommended that you drive at this time. Please plan extra time for this appointment.

When will my dressing be removed from my incision?

Your discharge instructions from the hospital will have specific instructions on when to remove your dressings. Always keep your dressings clean and intact. Contact the surgeon's office if you have any questions about your incisions.

How long do I need to wear my shoulder sling?

This depends greatly on your specific surgical repair. Your surgeon will discuss this with you at your follow-up appointments. When you are “weaning” yourself from wearing the sling, do so slowly. Start with a short period of time and slowly increase it depending on your comfort level. You may experience increased pain and arm fatigue if you stop wearing it suddenly.

MY QUESTIONS/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.

