

Post Op Instructions: AC Joint Reconstruction

PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION IF NECESSARY -DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE SURGERY CENTER OR VIA PHONE/EMAIL TO OUR STAFF AFTER ARRIVING HOME

DRESSING/BANDAGES

- Leave the dressing over your incision under you are seen in the office. As long as the edges are sealed, the dressing is waterproof, and you may shower the next day after surgery. Do not take a bath or submerge your shoulder in water until your incisions are checked on your first post-op visit. Your stitches are buried under the skin and will dissolve away over time.
- You may have bruising around your shoulder that can track down your arm. If you notice that there is bruising on your shoulder, arm, elbow, wrist, or hand (and you don't have pain in these places), then don't worry, this is normal

MEDICATIONS

- A nerve block was performed where an injection of local anesthesia was injected into your shoulder after the completion of the operation. During this time, you will have little to no feeling in the body part where you had surgery (i.e. arm). This nerve block will wear off in 18-24 hours - you will know this is happening as your hand and arm will tingle. To control your pain during this transition while the nerve block is wearing off, you must eat first and then begin taking pain medication.
- You can begin the prescription pain medication provided to you upon arriving home and continue every 4-6 hours as needed for pain.
- Most patients will require some narcotic pain medication for a short period of time this can be taken as per the directions on the bottle.
- Common side effects of the pain medication are nausea, drowsiness, and constipation to decrease the side effects, take medication with food - if constipation occurs, consider taking an over-the counter laxative such as Dulcolax or Colace.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed (1-800-974-5633)
- Do not drive a car or operate machinery while taking narcotic medication.
- Ibuprofen 200-600mg (i.e. Advil) may be taken in between the narcotic pain medication to help smooth out the post-operative 'peaks and valleys', reduce the overall amount of pain medication required, and increase the time intervals between narcotic pain medication usage.

ICE THERAPY

- Beginning immediately following surgery, use the ice machine (when prescribed as directed for the first 2-3 days following surgery. Ice at your discretion thereafter.
- When using "real" ice, avoid direct skin contact > 20 mins to prevent damage/frostbite of the skin. Check the skin frequently for excessive redness, blistering, or other signs of frostbite. When using the ice machine, it is okay to ice continuously as long as you check the skin frequently.

ACTIVITY

- Wear sling at all times other than personal hygiene, wardrobe changes, and exercises (last page).
- The sling will be worn during the day and at night until you are 2 weeks post-op. At the 2 weeks post-op, you may remove the sling at night. At 6 weeks, the sling may be discontinued, unless otherwise specified.
- It is ok to sleep however comfortable you are.
- Do not engage in activities which increase shoulder pain over the first 7-10 days following surgery.
- NO driving. You will be cleared to drive after the first postoperative visit if narcotic pain medication has been discontinued.



Air travel is permitted 14 days after surgery. Air travel and immobility increase the risk of blood clots. Unless you have been previously instructed to avoid aspirin products for medical reasons or you are under age 16, ensure that you are taking 81 mg baby aspirin twice daily beginning the day after surgery to minimize the risk of blood clot.

EXERCISE

- Begin exercises 3x daily starting the day after surgery (wrist flexion/extension, elbow flexion/extension,) unless otherwise instructed. See the last page for reference. If the exercises cause pain, stop, and try again later in the day.
- Shoulder stiffness and discomfort are normal following surgery.
- Avoid movement of the arm against gravity or away from the body.
- Formal physical therapy (PT) will begin after your first postoperative visit or no sooner than 7 days after surgery.

DIET

- Begin with clear liquids and light foods (Jello, soup, etc.).
- Progress to your normal diet as tolerated.

APPOINTMENT

Your postoperative appointment will be made prior to surgery. You will receive a reminder from the office prior to the visit. This will be 10-14 days after surgery at your surgeon's office.

EMERGENCIES

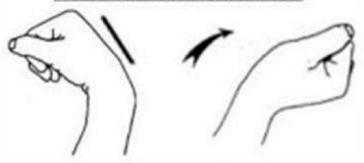
Contact the practice hotline at 1-800-974-5633 if any of the following are present:

- Unrelenting pain, despite taking medications as prescribed.
- Fever (over 101°). It is normal to have a low-grade fever following surgery.
- Continuous drainage or bleeding from incisions (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting uncontrolled

DO NOT CALL THE HOSPITAL OR SURGICENTER FOR EMERGENCIES IF YOU HAVE A NEED THAT REQUIRES IMMEDIATE ATTENTION, PROCEED TO THE NEAREST EMERGENCY ROOM



WRIST FLEXION / EXTENSION



Actively bend wrist forward. Then backwards as far as you can. Repeat 10-15 times. Do 3 sessions per day.

ELBOW FLEXION / EXTENSION



With palm either UP, DOWN, or THUMBSIDE UP gently bend elbow as far as possible. Hold for 5 seconds. Then straighten arm as far as possible. Repeat 10-15 times. Do 3 sessions per day.