

## Shoulder Surgery Post-Operative Instructions

**Medications:** Numbing medicine is often used during the surgery or provided by the anesthesia team in the form of a block. When this medication wears off, it is not uncommon for pain to increase. To avoid “getting behind” take pain medications before numbing wears off. If you would like to have a “repeat” block, please call 801-587-5373 Monday to Friday. You must arrive before 2 pm.

- Take Tylenol (acetaminophen) 650 mg 1 tablet every 6 hours (max 3000 mgs/day) **as needed** for pain.
- Take Celebrex (celecoxib) 100 mg 1 tablet every 6 hours **as needed** for pain.
- Take Journavx (suzetrigine) 50 mg 1 tablet every 12 hours for two weeks after surgery. You will be given the starting dose of 100 mg by the anesthesiologist prior to leaving the hospital.
- Take Aspirin 81 mg 1 tablet twice a day scheduled for two weeks to prevent blood clots.◊
- With Tylenol, Celebrex, Journavx, and ice in combination, most patients **do not require** oxycodone.
- Take Oxycodone 5 mg 1-2 tablets every 4-6 hours **as needed** for pain.
  - o Side effects of oxycodone are frequently and include drowsiness, constipation, nausea, and itching. Do not drive or operate machinery while taking Oxycodone. Oxycodone can be habit forming and should be avoided. The minimum dose should be taken as infrequently as possible. Please keep all medications in a secured location. Dispose of Oxycodone when it is no longer needed. Refills for this medication will **not** be dispensed after 3 PM on Fridays.
- Take Senna (senna-docusate) 8.6-50 mg 1 tablet twice a day **as needed** for constipation. If constipation persists, over-the-counter Milk of Magnesia, Dulcolax, and Miralax can all be helpful.
- Take Zofran (Ondansetron) 4 mg 1 tablet every six hours **as needed** for nausea.
- For sleep: take Melatonin 5 mg (over the counter) at bedtime **as needed**. Avoid caffeine after noon, and digital screens or alcohol after 8 PM.

Suggested Medication Schedule	
Time	Medication
8 AM	Celebrex, Journavx, Senna, Aspirin
11 AM	Tylenol
2 PM	Celebrex
5 PM	Tylenol
8 PM	Celebrex, Journavx, Senna, Aspirin
11 PM (if awake)	Melatonin, Tylenol
3 AM (if awake)	Celebrex, Tylenol

**Diet** - Resume a regular diet as soon as possible. Start with clear liquids and light foods (jello, soup, etc.). Once nausea has resolved, Dr. Chalmers recommends a diet rich in fruits, vegetables, and fiber to provide your body with the nutrients it needs to heal.

**Sling** - Use the sling □ as needed, □ for 2 weeks, □ for 6 weeks. Once you are beyond this period, you may discontinue the sling, but you may prefer to continue to use the sling in unpredictable situations and in crowds, to alert others that you recently had shoulder surgery.

- If you get a nerve block, your arm will be numb until the medication wears off. During that period, protect your arm as you will not have normal protective sensation.
- Remove the sling while keeping the shoulder still for: dressing, bathing, and exercises.
- To remove the sling: unfasten the neck strap, and slide the arm out while allowing the elbow to straighten. Keep the arm by the side during this process. If the sling is correctly positioned, the arm is parallel to the floor and the hand is at the belly button.
- Sleep in your sling. You cannot remove the sling to drive. We cannot recommend driving while wearing a sling. Insurance companies will NOT cover accidents while wearing a sling.
- Remove the sling 3 times a day for 15-20 minutes at a time. During this time, maximally straighten and bend your elbow. Maximally straighten and bend your wrist. Make a tight fist and then maximally straighten your fingers. Repeat each of these exercises for 10 repetitions. These exercises are very important to retain mobility in your elbow, wrist, and hand.

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## Activity

- Increase your activity levels as anesthetic medication wears off.
- Place a pillow behind the elbow when sitting or lying down to decrease pain.
- Most patients finding sleeping in a “recliner” position, either in a chair or with pillows in bed, to be the most comfortable after surgery. Return to normal sleeping when you are comfortable.
- Long periods of sitting and long-distance travel within the first two weeks after surgery may increase discomfort but is not dangerous. If this is necessary, take frequent breaks.
- Most patients return to desk work or school 3-4 days after surgery, if pain is tolerable.
- For the first 6 weeks after surgery, do **not** lift anything heavier than 2-3 pounds, do not use the arm or elbow to “push off” when rising from a chair or bed, and do not reach behind your back.

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## Dressing care

- Do not remove clear dressing over incision.
- You may shower immediately. Let water run over clear dressing, do not scrub dressing. Pat the dressing dry. Do not place any alcohol, lotion, or ointment on dressing.
- Do not immerse the shoulder in a bath, pool, pond, or ocean until four weeks.
- A small amount of wound drainage is common. If noted, please cover the area with small band-aids or gauze until it clears.
- It is normal for the shoulder to bleed and swell following surgery. Bruising of the shoulder, arm, chest, and flank are common and normal with surgery.
- Ice is very important after shoulder surgery and should be used continuously over the dressing for the first three days. Following dressing removal, use the ice three to five times per day for 20-40 minutes, especially before sleep. You may use ice within a plastic bag, gel ice packs, or an ice machine. Always place a towel or cloth between ice and skin to avoid frostbite.

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## Follow-up

- A follow-up appointment has already been made for you:  
Time: \_\_\_\_\_ Date: \_\_\_\_\_ Location: \_\_\_\_\_
- Please return to the ER if you experience: excessive wound drainage or drainage for longer than five days after surgery, redness surrounding the incisions, difficulty breathing, calf pain, or numbness or tingling in the arm or hand that was not present before surgery and has lasted more than 24 hours.
- Fevers are not uncommon after surgery and usually are not a sign of an infection. If you experience a fever in the first five days, take Tylenol and continue to monitor your temperature. Please contact the office with any fever that occurs beyond five days post-operatively or continues despite Tylenol.

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## Contact Info

- Questions about surgery or recovery: Bri Arsenault: (801) 587-0063
- After Hours Emergency Contact: (801) 581-2121 (Ask for the orthopaedic resident on call)
- Practice e-mail: [chalmerspractice@hsc.utah.edu](mailto:chalmerspractice@hsc.utah.edu)