

Post-Operative Instructions – Arthroscopic Rotator Cuff Repair

Pre-Op Check List

- Fill narcotic prescription immediately when given to you (or it will expire); do not take narcotics pre-operatively! It is for you to use post-operatively.
- Pre-operative evaluation with your medical doctor (internist) to clear you for surgery when your doctor instructs you.
- Pre-operative blood tests, EKG and chest xray (all need to be done within 30 days of your surgery). (chest xray necessary if you are 60 years old or greater).
- Meet with representative from device company for sling fitting and post-op cryotherapy
- Schedule your 1st post operative appointment with our Surgical Scheduling Team for 7-10 days after your surgical date. Surgical Scheduling can be reached at (212) 305-0622.
- Discontinue all aspirin products at least 7 days prior to surgery.
- The Hospital Pre-Op Staff will notify you of your arrival time the afternoon before surgery. If you are not contacted by 3:30pm the day before surgery, please call our office for final instruction at (212) 305-0622.
- Bring your sling and cryotherapy with you to the hospital on day of surgery.
- Do NOT eat or drink anything past midnight the night before surgery.
- Under no circumstances should you write anything on your operative site – this will be done by me in the pre-op holding area on the day of surgery

Surgery Day

- You will be asked to arrive 2 hours before the scheduled surgery time (remember to not eat or drink anything after midnight).
- You will be admitted and meet the nursing staff, anesthesia staff, and one of my team members will most likely meet and examine you as well in the pre-op holding area.
- You will usually have your regional anesthetic placed in the pre-op regional block area.
- Your surgery will be performed and usually lasts 1-2 hours.
- You will have your cryotherapy sleeve (If you purchased it) and sling put on either in the operating room or in the recovery room that you were fit for preoperatively.
- You will have a dressing on your shoulder overlying the surgical incisions. The bulky dressing may be removed 24 hours after surgery and you may shower. There are white butterfly “steri-strips” on the skin and these should stay on until you return to the doctor’s office.
- You will stay in the recovery room typically 1-3 hours depending on the duration of the regional anesthetic.
- You need someone to pick you up at the hospital (you cannot take public transportation home!)

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Post-operative Day 1

- Do not put any creams or antibiotic agents on the wounds.
- You can shower – remove the dressing but not the steri-strip bandages. Pat dry the wounds after the shower. Put band-aids or sterile gauze over the wounds after the shower.
- Do not move your shoulder at all – however, you can put underarm deodorant on.
- You can come out of the sling 3 times daily – one time to shower and two times to move your **ELBOW, WRIST, and FINGERS**.
- Use your cryotherapy as instructed to decrease swelling and diminish pain.

Post-operative Days 2-7 (1st Post-operative visit)

- Continue as above.
- You will have your 1st post-operative visit somewhere in this time period (7-10 days after surgery).
- At that visit, we will change your dressings and inspect your wounds.
- You may be given your 1st post-operative prescription from me to start Physical Therapy with all of the guidelines for your therapist to follow. Most “Large or Massive” tears will not begin PT for 4-6 weeks post-operatively.
- We will review your arthroscopic photos to show you what was done at your surgery.

Post-operative Weeks 1-6 (2nd Post-operative visit between 4-6 wks post-op)

- For small and medium tears PT will usually begin 2 weeks postoperatively.
- Large and massive tears will typically not have much, if any, PT during this phase.
- Sling will be worn between 4 and 6 weeks postoperatively.

Please call the office in the first day or two after surgery to schedule a post-operative visit. Your appointment should be **7-10 days after surgery**. If at any time there are any signs of infection (**increased swelling, redness, drainage from the incisions, warmth, fever, chills, or severe pain unrelieved by prescribed medications**) or if you have any questions or concerns, contact us at the office.

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FREQUENTLY ASKED QUESTIONS (FAQ)

- **When can I remove the sling?**
You can take the sling off for showering and to do your elbow, wrist and finger exercises on post op day 1. However, you must wear your sling in public and at night for sleeping for the 1st 4-6 weeks (your physician will specifically discuss duration dependent on the size of the tear and other factors).
- **When can I begin driving?**
Typically, you will be able to resume driving when your sling comes off ~4-6 weeks. While many people do drive earlier than this, keep in mind that it is against the law to drive while in a sling.
- **When can I return to work?**
This really depends on the individual patient specifically with respect to job demands (labor vs desk job). Some patients return to work as soon as 4-7 days post-operatively and others require extensive time away from work if “limited duty” is not available.
- **How long will I have Physical Therapy after the surgery?**
The typical therapy program will be a minimum of 3 months. The 1st phase of therapy will be designed to safely regain your range of motion while the 2nd phase of therapy will be directed at regaining function, strength, and endurance.
- **How much pain will I have?**
This is variable of course but we provide you with an appropriate amount of narcotic pills to keep you comfortable until your 1st post-operative visit. Remember, that your anesthetic block provided for surgery may last up to 24 hours so that it is not unusual for you to have a “dead arm” the next day after surgery.
- **Why is my shoulder “leaking”?**
Remember that arthroscopy is performed by pumping in a lot of fluid into the shoulder and this fluid then escapes through the small incisions (portals) – this is entirely normal to occur after surgery.
- **When should I call the office with concerns?**
Any signs of infection should be reported immediately – these include increased drainage (usually thick, cloudy, not liquid secondary to the arthroscopy), redness, increased warmth, and fevers (T > 101.8).