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Consultant Orthopaedic Surgeon – Surgery of Hip & Knee

SHOULDER SURGERY

POST-OPERATIVE INSTRUCTIONS

The degree of swelling and discomfort you experience may vary depending on how your procedure was performed and exactly what was done to your shoulder.

I. ACTIVITY LEVEL

- A. Rest frequently but not constantly, avoid lying on the operated side. Continue this until pain and swelling have mostly subsided.
- B. You may apply ice in a bag to your shoulder for 10-15minutes at a time, no more than once every hour. Take care not to injure the skin by direct application of freezing temperature.
- C. A sling is used to immobilize and unload the shoulder. You should remove the sling periodically to move the elbow. Unless instructed otherwise, the sling may be removed when sitting in a chair or lying in bed. When up and around you should always wear the sling until instructed otherwise. Don't let the arm hang.
- D. Driving is often not advisable until at least 6 weeks from the time of surgery.

II. MEDICATION

Prescription medicine may be given to you prior to discharge. Prescription medicines may make you drowsy and/or dizzy, therefore driving a car or operating machinery is not allowed.

Simple analgesic (pain relief) medicine with paracetamol only may be substituted for prescription medication as your pain permits.

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III. CARE of INCISIONS

A. The outer dressing may be removed prior to discharge or 2 days after surgery. Leave the inner dressing clean, dry and intact until your first post-operative review. If the inner dressing is inadvertently removed, replace it.

B. Keep the incision clean and dry after surgery. Showering is permitted, avoiding the direct stream contacting the water-resistant dressings. No baths or swimming until the incision is completely healed, (about 2 weeks). Routine showering may be resumed after first post-operative visit.

C. Once skin edges are healed scars can be massaged with a vitamin E cream. Scars may be kept covered with clothing or sunscreen when out in sunlight to minimize discoloration.

D. Some numbness around the incisions is normal during the healing.

IV. EXERCISE

Do Not Actively Lift The Arm Until Instructed To Do So

A. Range of motion of the elbow, wrist & fingers may begin immediately. Pendulum shoulder and isometric exercises are commenced as instructed by the physiotherapist.

B. Following major shoulder surgery, such as rotator cuff repair, a staged, controlled upgrading of rehabilitation exercises will require supervision from a physiotherapist in the community over several months.

This information should serve as a general guide after surgery. As this is general information, your own care may be modified based upon the specific nature of your surgery and general condition.