

**LHH DISCHARGE INSTRUCTION SHEET
SHOULDER AND ELBOW SURGERY**

Patient's Name: _____

Date: _____

Note: If you have any problems, please call Dr. McCann (646) 665-6784.

DAY OF DISCHARGE:

1. Call Dr. McCann's office for a **follow-up appointment**.
2. **WEAR SLING AT ALL TIMES, EXCEPT:** while washing and dressing (see # 3 and 4 below). You may remove the sling when in a chair or bed and rest your arm in your lap or on a pillow, whichever is more comfortable. **DO NOT** use the operated arm to reach behind you and assist your rising from a bed or chair. **Leave dressing ON until follow up appointment.**
3. Remove your sling when upright for dressing and allow the arm to hang straight down at your side.
4. You may remove the sling to **shower**. Allow the arm to dangle at your side but cover the operated area with a hand towel to keep the direct flow of water off the incisions.
5. Best to wear a button-down shirt and place the operated arm in the sleeve first, off last.
6. **Use operated arm** below shoulder level as comfort permits for everyday activities such as washing hands, buttoning shirt buttons, and eating. Bend the elbow and allow fingers to touch your nose, but do not raise the arm any higher. Safe range of motion is to actively move the hand between your side pockets and nose, and, within this limited range of motion, you can be independent in self-care: washing, dressing and feeding yourself.
7. Place a plastic bag full of **ice** on the operative site for 20 minutes every two hours as necessary to relieve pain. If not painful, no need to ice the operative site.
8. **Sleep** with sling on 45-60 degrees upright in bed with extra pillows and a firm pillow under your elbow for maximum comfort; lying down flat is usually more painful, but you may sleep in this position if comfortable.
9. Take **pain medication** as needed (SEE BELOW).
10. It is normal to develop **swelling** and **bruising** (black and blue) in the arm, chest, and hand 2-5 days following surgery. If the swelling is uncomfortable, lie down and elevate the hand on a pillow above the level of your heart. Also, actively move your fingers and wrist to help decrease swelling. Swelling and bruising will resolve on their own at 2-3 weeks following surgery.

MEDICATIONS: Use a narcotic only if pain not sufficiently controlled by **the combination of Celebrex, Tylenol, and an ice pack, i.e. pain score greater than 5/10.**

1. **CELEBREX (200mg)** is a strong anti-inflammatory and a non-sedating prescription strength pain reliever. Take one **CELEBREX** twice daily with breakfast and dinner each day. Continue for as long as you have pain. **SIDE EFFECTS:** Patients with *gastritis, peptic ulcer disease, or hiatal hernia* should not take **Celebrex**. If stomach pain develops when taking **CELEBREX**, stop the medication.
2. **TYLENOL EXTRA STRENGTH (500mg)** is a non-sedating pain reliever that should be taken **in addition to CELEBREX**, as they do not interact with each other, and the **combination** of both medications is more effective than taking each one separately. Take 2 tablets with breakfast, lunch, dinner, and at bedtime. **SIDE EFFECTS:** There are minimal side effects from **TYLENOL**, but **DO NOT** exceed the maximum daily dose of 4000mg, or 8 tablets. Stop Tylenol and Celebrex when you have no pain.
3. **OXYCODONE (5 mg)** is a narcotic and a potent pain reliever. **SIDE EFFECTS** of narcotics include nausea, sedation, light-headedness, fatigue, and constipation. Many patients find the side effects of narcotics worse than the post-op pain. For this reason, take the narcotics only if the **combination of CELEBREX and TYLENOL** do not give you adequate relief, i.e., a pain score of **less than 5/10**. Take 1 or 2 tablets of **OXYCODONE** every 4 hours only if pain score is **greater than 5/10**. Narcotics should not be required more than 2-5 days post-operatively. There is no cross-reaction of the **OXYCODONE** with **CELEBREX** or **TYLENOL**.
4. **COLACE** and **SENOKOT** will be prescribed for treatment of constipation.