

POSTOPERATIVE INSTRUCTIONS

SLAP Repair

Wound Care:

- Maintain your operative dressing.
- It is normal for the shoulder to bleed and swell following surgery – if blood soaks into the bandage, do not become alarmed – reinforce with additional dressing.
- Please maintain steri-strips in place.
- Remove surgical dressing on the second postoperative day and apply waterproof Band-Aids over incisions and change daily.
- You may shower after removing the first dressing on the second postoperative day by placing waterproof Band-Aids over incision areas.
- Do NOT immerse the operative shoulder until 14 days after surgery

Icing:

- Icing is very important for the first 5-7 days after surgery.
- Use an ice machine continuously or ice packs every 2 hours for 20 minutes daily until your first postoperative visit.
- Do not place the ice bag or cooling device directly on the skin. Care must be taken to avoid frostbite to the skin

Activity:

- Gentle range of motion of your hand and elbow is encouraged.
- While exercises are important, don't overdo it. Common sense is the rule. Increased swelling and/or pain is usually an indication you're overdoing it.
- Start physical therapy within 1-3 days. Please take the attached physical therapy protocol with you to your first physical therapy appointment. If one is not attached, please contact Dr. Glomset at ortho@jtglomsetmd.com
- When sleeping or resting, inclined positions (ie: reclining chair) and a pillow under the forearm for support may provide better comfort **STILL IN SLING**
- Avoid long periods of sitting or long distance traveling for 2 weeks.
- NO driving until instructed otherwise by physician, it is illegal to drive in a sling

Sling:

- Wear your sling at all times, except to shower or dress.

Medications:

- Do not drive a car or operate heavy machinery while taking narcotics
- You have been prescribed a narcotic (either Norco or Percocet) for pain control. This is to be used for a short time period.

- Take 1 tablet every 4-6 hours as needed
- Max of 12 pills per day
- Plan on using 2-5 days, depending on the level of pain
- Do not take additional Tylenol (acetaminophen) while taking Percocet.
- Common side effects include nausea, drowsiness and constipation. Take medication with food to decrease side effects.
- Ibuprofen (600-800mg) may be taken in between the narcotic medication.
- **You should take an aspirin (81m) daily for 2 weeks.** This may lower the risk of a blood clot developing after surgery. Should severe calf pain occur or significant swelling of the calf or ankle, please contact us.
- You should resume your normal medications for other conditions the day after surgery. You may not drive or operate heavy equipment while on narcotics. It is important not to drink while taking narcotic medication.

Diet:

- Resume normal diet as tolerated this evening. We have no specific diet restrictions after surgery, but extensive use of narcotics can lead to constipation. High fiber diets, lots of fluids and muscle activity can prevent this occurrence.
- The anesthetic drugs used during surgery may cause nausea for the first 24 hours. If nausea is encountered, drink only clear liquids. The only solids should be dry crackers or toast. If the nausea and vomiting become severe or you show signs of being dehydrated (lack of urination), please call.

Emergencies:

- Contact Dr. Glomset or his nurse at 405-885-8195 or by email ortho@jtglomsetmd.com if any of the following are present:
 - Difficulty breathing
 - Painful swelling or numbness
 - Unrelenting pain
 - Fever (over 101° – it is normal to have a low grade fever for the first day or two following surgery) or chills
 - Redness around incisions
 - Color of lower extremity
 - Continuous drainage or bleeding from incision (a small amount of drainage is expected)
 - Excessive nausea/vomiting

****If you have an emergency after office hours or on weekends, call 405-272-8400 and you will be connected to our page service – they will contact Dr. Glomset or one of his partners if he is unavailable.**

****If you have an emergency that requires immediate attention, proceed to the nearest emergency room or call 911**

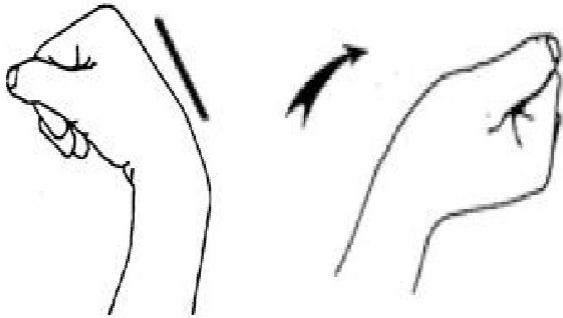


JT GLOMSET, M.D.

ORTHOPEDIC SURGERY & ;

P: 405.885.8195 F: 405.218.2535 E: ortho@jtglomsetmd.co
www.jtglomsetmd.co

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.
****DO NOT PERFORM THIS EXERCISE IF
BICEP TENODESIS WAS PERFORMED****

SHOULDER RANGE OF MOTION

(Self-stretching activity)

PENDULUM SWINGS

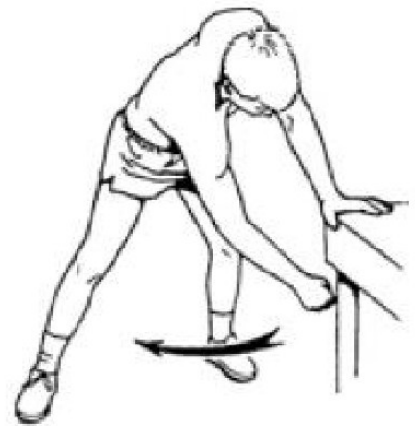
(Clockwise/counterclockwise)



Let arm move in a clockwise circle,
then counterclockwise by rocking body
weight in a circular pattern.
Repeat 10-15 times. Do 3 sessions per day

PENDULUM SWINGS

(Side to side)



Gently move arm from side to side
by rocking body weight from side to side.
Let arm swing freely.
Repeat 10-15 times. Do 3 sessions per day