

Your Shoulder Replacement Surgery & Recovery

How to Prepare & What to Expect



MY APPOINTMENTS

Date & Time of My Pre-Anesthesia Testing

Location for My Pre-Operative Visit

- WakeMed Raleigh Medical Park – Pre-Anesthesia Assessment & Testing**
23 Sunnybrook Road, Suite 110 – Raleigh
919-350-6493
- WakeMed Cary Hospital – Outpatient Assessment Center**
1900 Kildaire Farm Road – Cary
Use the main entrance to the hospital; ask the Information Desk attendant for assistance.
919-350-2437
- WakeMed North Hospital**
10000 Falls of Neuse Road – Raleigh
Use the main entrance to the hospital; check in at the Concierge Desk.
919-350-1442

Date of My Surgery

Arrival Time

Location of My Surgery

Please see the map at the back of this book for directions to the appropriate entrance, where your driver can park, etc.

- WakeMed Raleigh Campus – Day Surgery**
3000 New Bern Avenue – Raleigh
919-350-8730
- WakeMed Cary Hospital – Surgical Services**
1900 Kildaire Farm Road – Cary
919-350-2050
- WakeMed North Hospital – Day Surgery**
10000 Falls of Neuse Road – Raleigh
919-350-1430

Your Shoulder Replacement Procedure

It's time to begin your journey to improved mobility!

Thank you for choosing WakeMed for your shoulder replacement procedure. We have learned from experience that patients and their families feel much more comfortable about medical procedures when they know:

- How to properly prepare
- What to expect when they are in the hospital
- How to take care of themselves at home

Please review the information in this book. We want you to have all the information you need to feel positive and confident about your preparation, procedure and recovery.

If you have any questions, please call us. A member of the WakeMed Total Joint Replacement Team will be happy to help you.

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Replacing Your Painful Shoulder

The Shoulder Joint

A joint is a place in the body where the ends of two or more bones meet. The shoulder joint includes two bones:

- Humerus (upper arm bone)
- Scapula (shoulder blade)

The shoulder is called a ball and socket joint because the rounded head of the humerus is shaped like a ball and fits inside the glenoid fossa, a cup-shaped part of the scapula that resembles a socket.

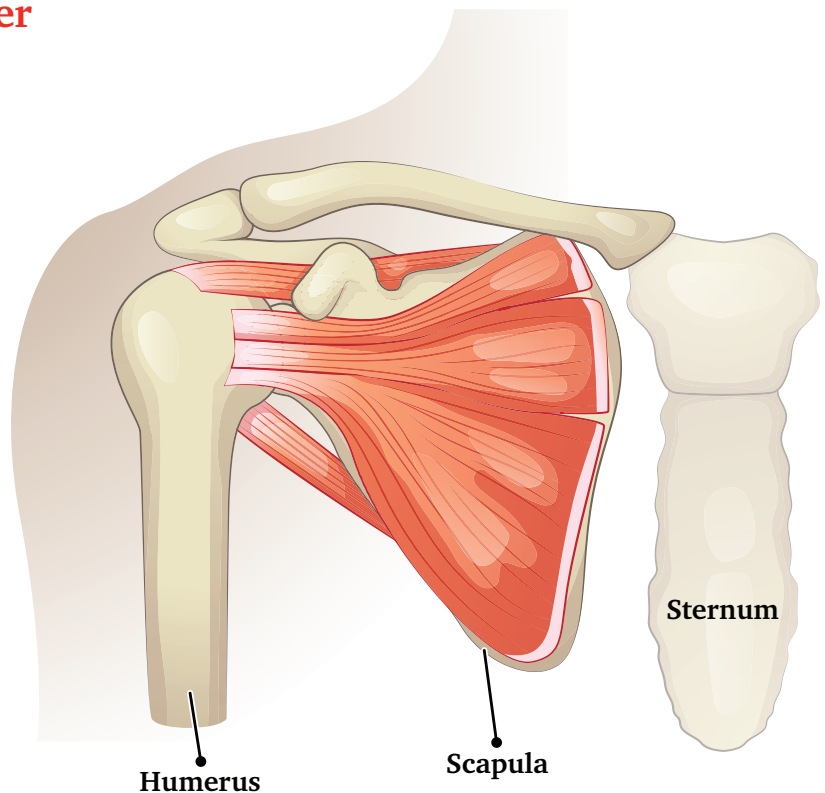
Both the ball and socket are covered by a dense, slippery type of tissue called cartilage. Cartilage provides a smooth surface inside the socket. Once this cartilage becomes damaged or diseased, the end of the humerus is no longer able to move smoothly in its socket, causing pain and decreased mobility.

The Painful Shoulder

Joint disease in the shoulder is often the result of arthritis – an inflammation in the joint. This condition can cause pain when the shoulder is moved and can keep you from doing many of the activities you enjoy in life. Your shoulder joint can be surgically replaced so that you can move freely and more comfortably again.

During your surgery, an artificial shoulder joint called a prosthesis which consists of a metal ball on a stem, replaces the head and neck of the humerus bone. A very hard plastic cup forms a new socket. The special metal and plastic used in the new joint allows for easy movement of the shoulder.

The shoulder is different than other joints because there are two types of replacements. A traditional shoulder replacement resurfaces the two sites like other joint replacements. A reverse total shoulder replacement is necessary when your surgeon is worried you do not have a functioning rotator cuff.



Pre- and Post-Surgery Exercises

Begin when you receive this booklet.

Strengthening your muscles before joint replacement surgery will aid in your recovery. Please do the following exercises as directed by your surgeon or physical therapist. However, only do the exercises that do not cause significant joint pain.

You will receive instructions on which exercises to continue after your surgery. A physical therapist will instruct you on how to properly perform them.



Circular Hanging Arm with Table

Do 1 set of 10, twice a day.

Begin standing and bend forward from your hips. Rest the hand of your good arm on a table. Let your other arm hang.

Slowly shift your body weight in a circular motion. Your hanging arm will move with your body weight. Do not use your arm muscles to move the arm. Just let it hang and move naturally with the motion of your body.

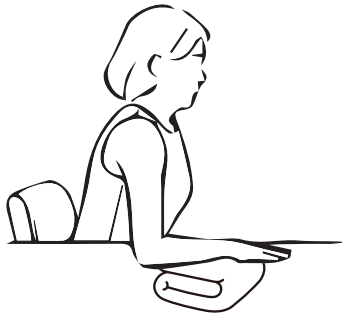


Standing Shoulder Blade Squeezes

Do 2 sets of 15, twice a day.

Stand with your arms resting at your sides.

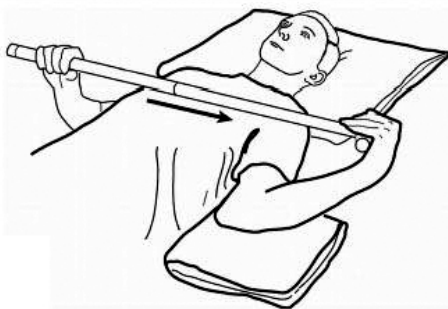
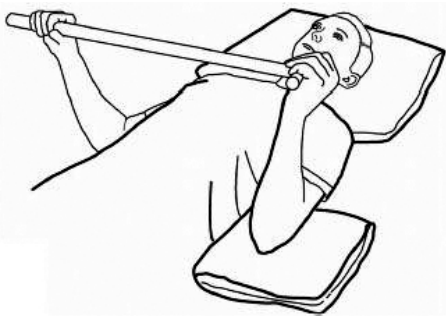
Gently squeeze your shoulder blades together, relax and repeat. Keep your back and shoulders relaxed throughout the movement. Do not shrug your shoulders.



Seated Towel Slide

Place a towel on a table. Sit at the table with the hand of your bad arm on the towel.

Slowly lean forward and slide your hand and towel on the table. Slowly bring your hand and towel back to the starting position. Be sure to keep your hand on the table and do not shrug your shoulders during the exercise.

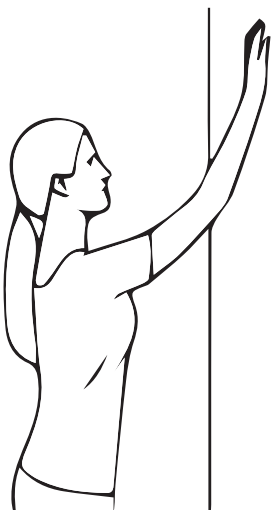


Shoulder Rotation while Lying Down

Hold each rep for 10 seconds. Do 1 set of 10, twice a day.

Lie on your back holding a dowel or yardstick in both hands with your bad arm bent 90 degrees and your elbow against your body.

Using your good arm and the dowel or yardstick to guide the movement, slowly rotate your forearm out, keeping your elbow against your body. Hold for a count of 10. Return to the starting position and repeat. Try not to arch your back as you move your arm.



Wall Walk

Do 1 set of 10 reps, twice a day.

Face a wall and take a staggered stance (one foot farther ahead than the other). Rest the hand of your bad arm on the wall.

Slowly walk your fingers up the wall as far as you can and hold for 2-3 seconds. Slide your hand back to the starting position and repeat the exercise. Stop moving your hand if you feel pain. Stay in a comfortable range of motion. Do not shrug your shoulders during the exercise.

2-3 Weeks before Your Surgery

Talk to your primary care physician and your orthopaedic surgeon about the medications you take and if you need to stop taking any of them before your surgery. Make sure they are also aware of any health problems you have.

If you have a history of heart problems, you may need to see your cardiologist for medical clearance prior to surgery.

In addition, eat a healthy diet. It helps the healing process and to prevent surgical site infections.

Your Pre-operative Visit

Your pre-operative visit location and phone number are listed on the inside front cover of this book. Your pre-operative visit will last about 2 hours. A family member is welcome to come with you. You may eat and drink prior to your pre-operative visit which will include:

- Hospital Registration – Please bring your photo ID and insurance card/information.
- Non-fasting testing (blood drawn, urinalysis and electrocardiogram (EKG)). If you had testing done elsewhere, please bring reports to your pre-operative visit.
- A review of your current medications and medical history with a pre-operative nurse. Please bring your medications with you.
- A visit from Anesthesiology.

Days before Your Surgery

- If you normally shave your armpits or arms, stop shaving them three days prior to surgery. This helps prevent surgical site infections.

- Tell your physician, prior to surgery, if you have a cold, flu or other illness.

The Day before Your Surgery

- Gather the items in the Checklist of Things to Bring with You section of this book so you have them ready to take with you to the hospital.
- Do not drink alcoholic beverages or use tobacco 24 hours before surgery.
- For your safety, it is important that you do not EAT anything after 12:00 midnight the night before your surgery, unless otherwise instructed by your surgeon or anesthesia team. You may have clear liquids up to one hour before your arrival time at the hospital. Clear liquids are fluids you can see through and include black coffee (no cream), tea (no cream), soft drinks, apple juice and Gatorade or other high carbohydrate nutritional drinks. Do not drink orange juice, broth, gelatin, or alcoholic beverages. Do not eat candy or mints or chew gum.
- If you have on nail polish, remove it.

Checklist of Things to Bring with You to the Hospital

- A list of all the medications (prescription medication, over-the-counter medications, herbs, vitamins, supplements) you take – your list should include how much you take (dosage) and how often you take it.
- Health Care Power of Attorney and/or Living Will (if you have them)
- Short robe that opens in the front
- Any toiletry items you need
- Eyeglasses and case
- Hearing aids and case
- Dentures and case
- CPAP

Preparing Your Skin before Surgery

Preparing or “prepping” your skin before surgery can reduce the risk of infection at the surgical site. To make the process easier, you will clean your skin with Chlorhexidine Gluconate (CHG) antiseptic solution. At your pre-op visit, you will be screened for two strains of bacteria, *Staphylococcus aureus* (Staph) and methicillin-resistant *Staphylococcus aureus* (MRSA). Your result will determine the length and type of skin prep you will do to prepare for surgery.

If you are positive for Staph or MRSA:

1. You will receive a phone call from the pre-op nurse.
2. Buy a bottle of Hibiclens (4% CHG). Follow instructions on the bottle.
3. Shower with Hibiclens for four days before your surgery.
4. On day 5 and the morning of surgery, you will use the CHG bath cloths provided to you by the pre-op nurse. See instructions on how to use the bath cloths.

Day 1 Hibiclens	Day 2 Hibiclens	Day 3 Hibiclens	Day 4 Hibiclens	Day 5 Bath Cloths	Day of Surgery Bath Cloths
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If you are negative for Staph or MRSA:

1. You will not receive a phone call from the pre-op nurse.
2. On the night before surgery and morning of surgery, you will use the CHG bath cloths provided to you by the pre-op nurse. See instructions.

Night Before Surgery Bath Cloths	Day of Surgery Bath Cloths
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Using the CHG Bath Cloths

- Always shower two hours prior to using CHG cloths if shower is desired.
- Do not shave your armpits or arms for three days prior to surgery.
- Do not allow CHG to come in contact with eyes, ears, mouth, or nose.

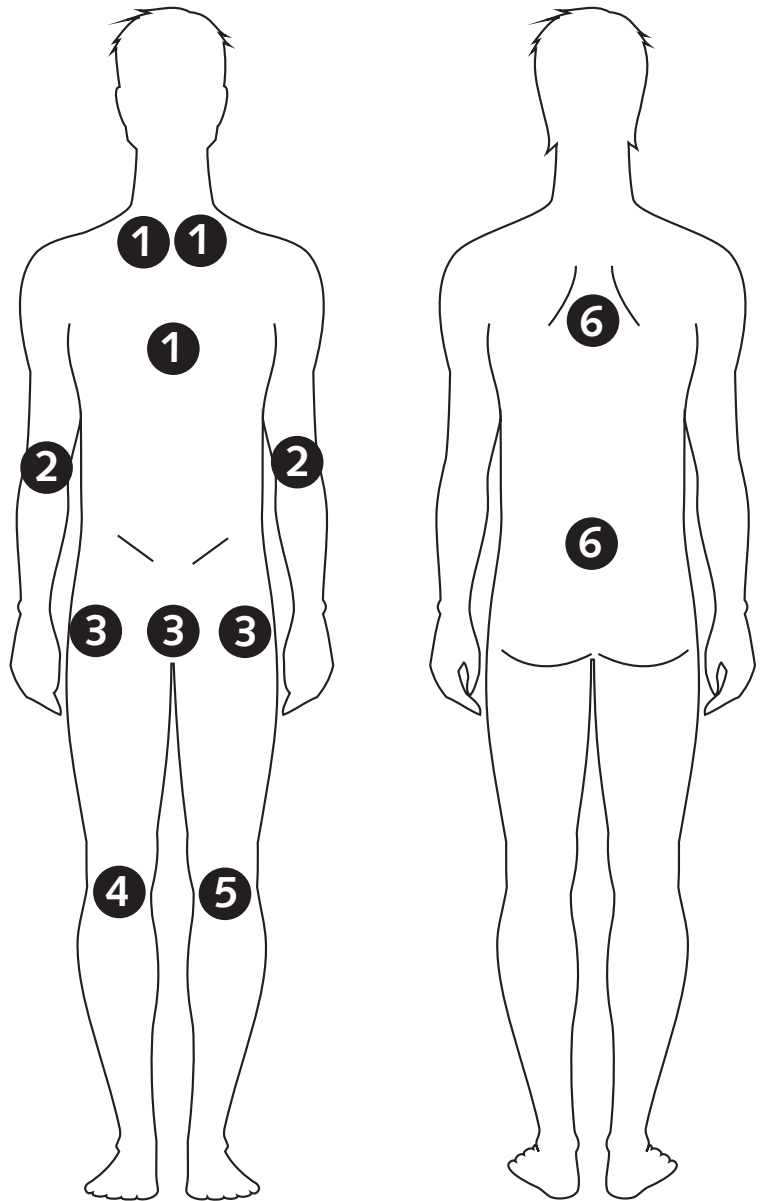
Directions

- DO NOT MICROWAVE PACKAGES! To warm the cloths, put the unopened package in a sink of warm water for 10 minutes.

Prep Circled Areas Only

Use one clean cloth to prep each area of the body in the order shown below (Steps 1 through 6). Wipe each area thoroughly using back-and-forth motion. You may need help. Use all cloths in the packages.

- Use each cloth for 30 seconds.
1. Use one cloth to wipe the neck and chest.
 2. Use a new cloth to wipe both arms, starting with each shoulder and ending at fingertips. Be sure to thoroughly wipe the armpit areas last.
 3. Use a new cloth to wipe the right and left hip followed by your groin. Be sure to wipe folds in the stomach and groin areas.
 4. Use a new cloth to wipe the right leg, starting at the thigh and ending at the toes. Thoroughly wipe the inner leg and behind your knee.
 5. Use a new cloth on your left leg, starting at the thigh and ending at the toes. Thoroughly wipe the inner leg and behind your knee.
 6. Use a new cloth to wipe your back starting at the base of your neck and ending by wiping the buttocks area.



Prep Circled Areas Only

After Prepping

1. **DO NOT RINSE YOUR SKIN!** Allow your skin to air dry.
2. Do not apply any lotions, deodorant, moisturizers, or makeup after prepping.
3. Dress in clean sleepwear or clothes.
4. Throw away used CHG cloths in the trash. Do not flush down the toilet.

The Day of Your Surgery

Before You Come to the Hospital

- Follow the instructions you received at your pre-operative visit regarding medications to take the morning of your surgery.
- You may brush your teeth – be sure to spit everything out.
- Leave all jewelry and valuables at home.
- Leave all of your medications at home.
- Arrive at the hospital two hours before your scheduled surgery time.

Arriving at the Hospital

Please see the maps starting on page 13.

Cell Phone Usage

Cell phones can be used in most areas of the hospital. If you are unsure, please ask a staff member.

Wireless Internet Access

Free wireless Internet access is available on your own laptop computer or tablet at all WakeMed locations. We cannot provide computers or technical support.

During Your Surgery

- You will be assigned a tracking number, which will be given to your family. Your family can then follow your tracking number on the flat screen monitors located in the Surgery Waiting Area. The color-coded chart will be updated as you move from one treatment area to another.
- Family/support persons can wait in the Surgery Waiting Area.
- Your surgeon will speak with your family/support person once your surgery is complete.

- Family members will be directed to your hospital room where you will see them after your recovery in the Post Anesthesia Care Unit (PACU).

After Your Surgery

- Family and friends are welcome to visit you. One adult family member may stay the night. A pull-out couch or recliner will be provided.

Recovery

- Once you are awake you will be transferred to your hospital room.
- You should use the call bell to summon assistance if you need to use the bathroom. You have had anesthesia and pain medications which can put you at risk for falling.
- You should expect to get out of bed the day of your surgery.
- Your nurse will educate you on the different medications you will be given during your hospitalization.
- An incentive spirometer (device that helps improve lung function) will be provided. You will be instructed on how to use it. It is important that you use this to help decrease fevers after surgery. Please use this 10 times for every hour you are awake.
- Your nurse will let you know when you can begin eating.
- Drink lots of fluids after surgery.
- Make sure your health care providers use soap and warm water or an alcohol-based gel to clean their hands before and after they care for you. This helps to prevent surgical site infections.
- Expect bruising and swelling in your shoulder.
- Your arm will be numb for about 72 hours after surgery.

- Most patients have a small tube or drain coming out of their shoulder, which will be removed the day after surgery.
- Most patients are discharged from the hospital the day after surgery.
- The dressing is waterproof so you can shower with it on for a week and then gently remove it.

You will be able to leave the hospital once you can show that you can safely move around and your pain is controlled.

Relieving Your Pain

The type of pain control medication and the way it is given depends on your surgeon's preference for what is right for you. We want to make sure you are as comfortable as possible.

After You Leave the Hospital

Caring for Yourself at Home

Your nurse will give you instructions on how to care for your incision when you get home.

It is important to follow the instructions below if you are returning to your home or the home of a loved one after your procedure.

- Exercise is important. Get up and walk around as much as possible.
- It's good to have someone at home with you for the first 24 to 48 hours after surgery.

Post-discharge Rehabilitation

Our goal is for all patients to return home and to regain as much mobility as possible. To become fully mobile, you must keep doing your physical rehab – physical therapy and/or occupational therapy – after you are discharged from the hospital.

It's nice to have a plan before you leave the hospital. Your at-home plan is also influenced by your family's input, your strength and energy levels, family resources, support system, home situation, physician recommendations, and insurance benefits.

Driving a Car

- No driving until after your first appointment with your physician.

Stay Active

- Continue doing your exercises as instructed by your physical therapist.
- Avoid sports or over-exercising.
- Talk to your physician about when you can resume sexual activity.
- Rest often throughout the day.
- Patients usually start physical therapy within a week after surgery.
- You should wear your sling at all times, including sleeping. You may remove it to bathe.

Stay Safe

- Store items within easy reach.
- Remove all throw rugs.
- Move electrical cords out of your way.
- Have safety rails installed near the toilet, in the shower and near the stairs.
- Use firm chairs with straight backs, high seats and armrests.
- Follow your physician's and therapist's instructions on when to progress activities involving your shoulder.

Your Medications

- Take your blood-thinning medication (if you take) as instructed by your physician.
- Pain medication can cause constipation. Drink lots of fluids and take a stool softener if you need it.
- Your medications are listed on your Discharge Instructions sheet. Take them as instructed.

Take Good Care of Yourself

- Eat a healthy diet, rich in fruits and vegetables and low in fat and calories.
- Keep your doctor's appointments.
- Maintain a healthy weight.
- Tell all physicians and dentists who treat you that you have had a total joint replacement. You will need an antibiotic before dental or surgical procedures. Do not schedule elective dental procedures for three months following your surgery.
- Keep your wound clean, dry and free of powder or lotions.
- Each day, check your incision for redness, swelling or drainage. DO NOT alter your dressing.
- Do not put any creams or ointments on your surgery incision.

When to Call Your Orthopaedic Surgeon

- Staples or sutures become loose
- Sudden increase in pain
- Pain medication isn't relieving your pain
- Difficulty moving your shoulder
- Redness, swelling or drainage (thick, cloudy, yellow, pus, foul odor) coming from the incision
- Broken or red skin at the incision site
- A fever above 101.5° F
- Infections in other parts of your body such as the bladder, gums or throat
- Shortness of breath or difficulty breathing
- Pain in your chest or back
- Redness, swelling, tenderness or pain in either calf when walking
- Other questions or concerns

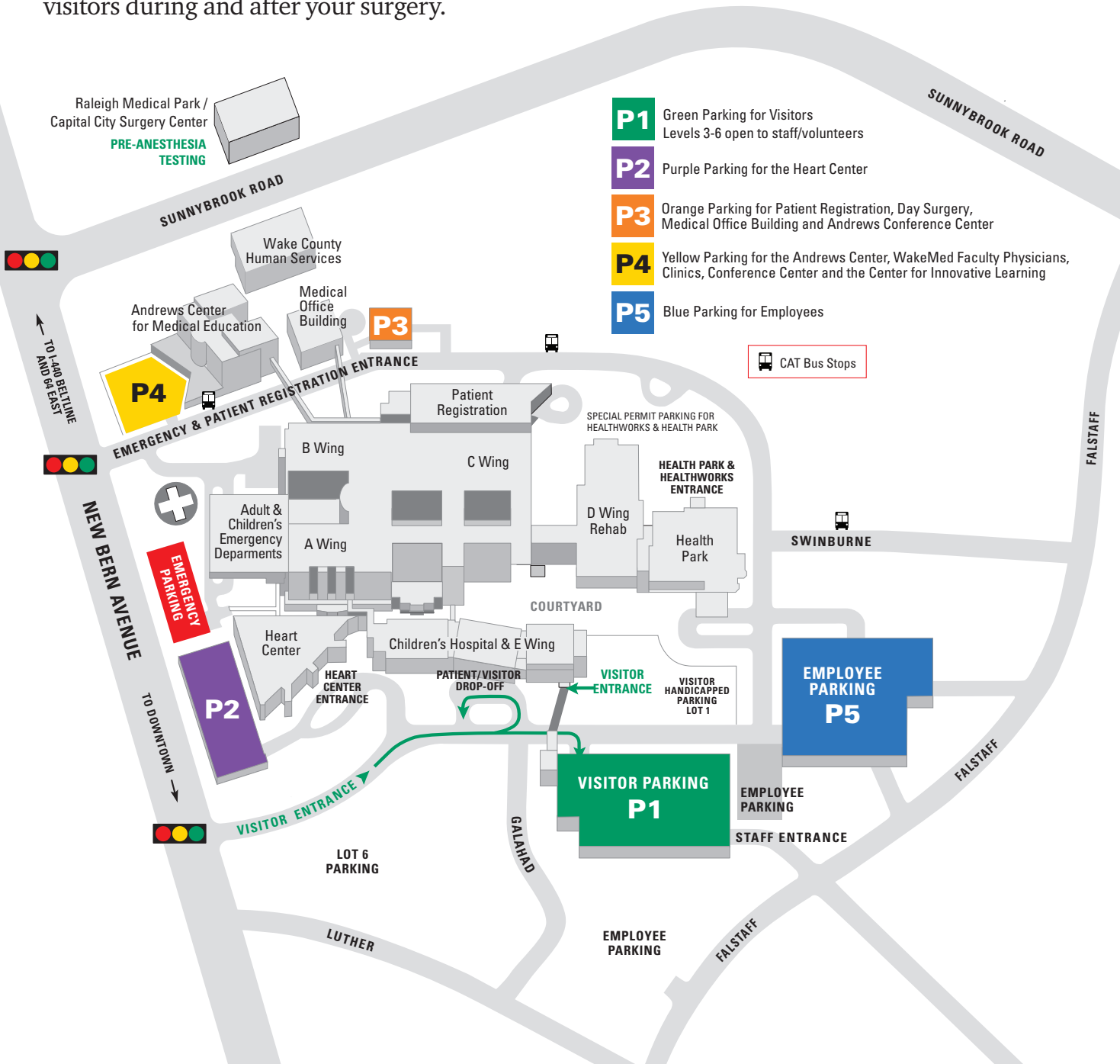
Call 911 if you have difficulty breathing or chest pain.

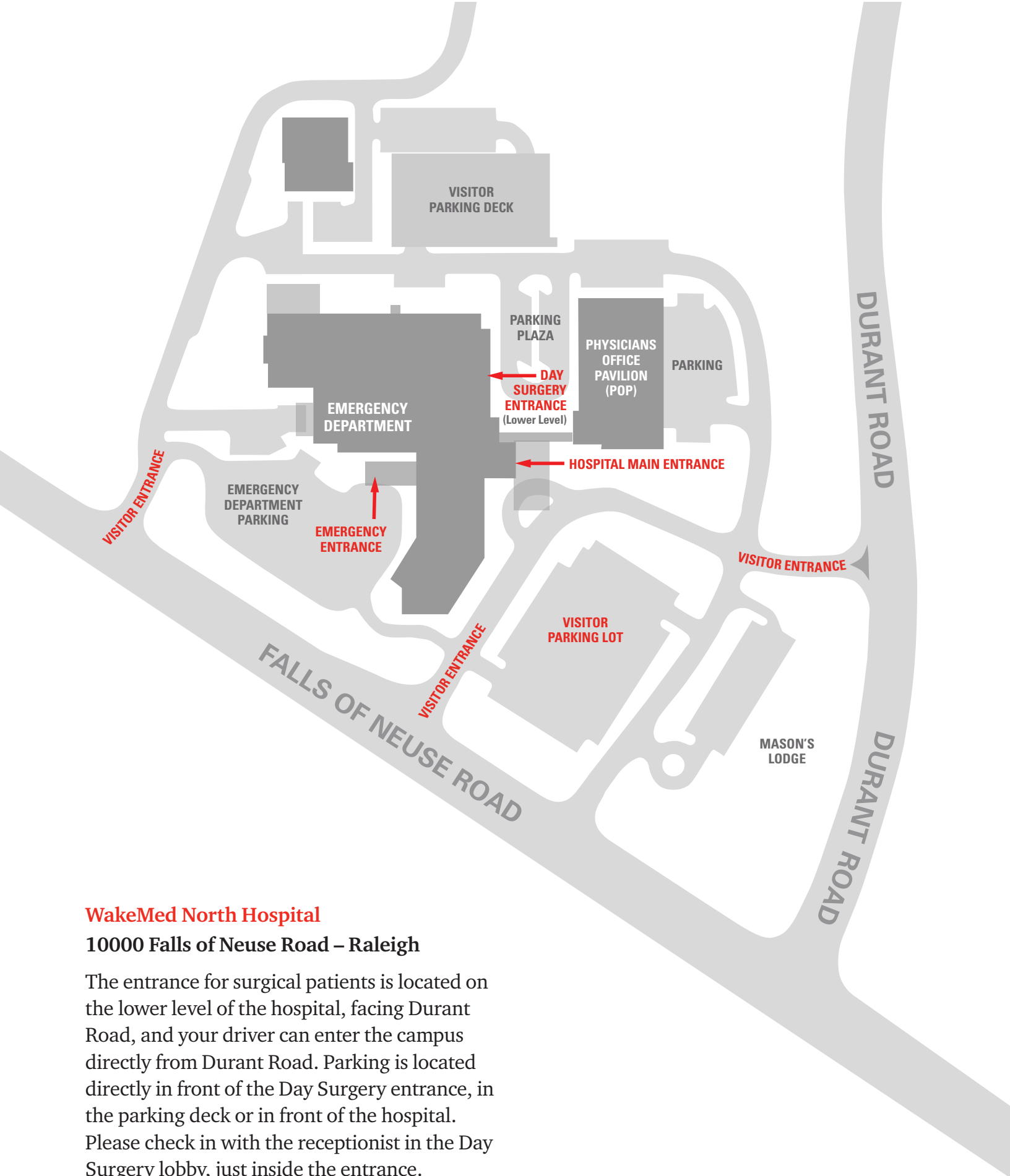
Hospital Maps & Directions

WakeMed Raleigh Campus

3000 New Bern Avenue – Raleigh

From New Bern Avenue, use the Emergency Department and Patient Registration entrance (see map). Your driver can drop you off at Patient Registration and park in the P3 (Orange) parking lot. Additional parking is available in the P1 (Green) parking deck for visitors during and after your surgery.





WakeMed North Hospital

10000 Falls of Neuse Road – Raleigh

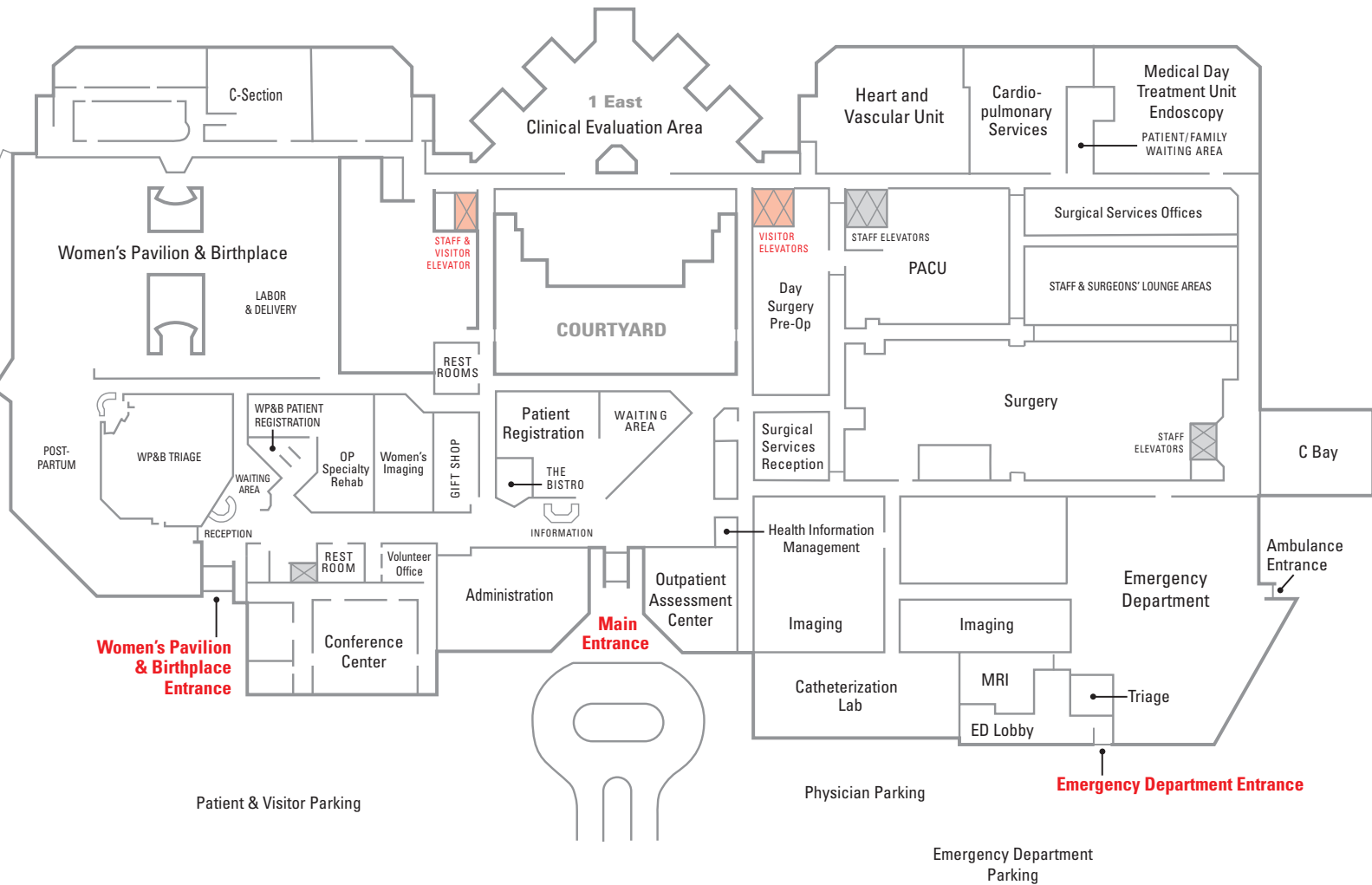
The entrance for surgical patients is located on the lower level of the hospital, facing Durant Road, and your driver can enter the campus directly from Durant Road. Parking is located directly in front of the Day Surgery entrance, in the parking deck or in front of the hospital. Please check in with the receptionist in the Day Surgery lobby, just inside the entrance.

WakeMed Cary Hospital

1900 Kildaire Farm Road – Cary

Your driver can drop you off at the main entrance to the hospital and park in the Patient/Visitor surface parking lot in front of the hospital. Please check in at the Information Desk, located just inside the hospital entrance.

First Floor



WakeMed 

www.wakemed.org

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