



Melbourne Orthopaedic Group

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## POST OPERATIVE REHABILITATION FOLLOWING YOUR SHOULDER SURGERY

This handout describes details of the early post-operative care of your shoulder. Your Physiotherapist will show you how you can move to prevent stiffness, while ensuring you protect your operation site. Rehabilitation is essential and to be successful requires your commitment to an exercise program. The main goals are to initially control pain and swelling, and then to eventually regain shoulder movement and strength.

### Control of Pain and Swelling

During the early post operative period, you may experience shoulder pain and discomfort. To control this, a combination of ice and medication is required.

### ICE

For the first few days, apply ice every hour for 20 minutes to the painful areas of your shoulder. Subsequently, the frequency of icing may be reduced to every 2-3 hours. Gel packs, ice bags or even frozen peas in a damp cloth work well. Keep the dressing dry, and if they become wet, pat them dry with a towel. Wet bulky dressings can be dried carefully with a hairdryer on the low/warm setting.

### Medication

Follow the instructions as provided upon discharge. As a general rule your medication requirements should continue to decrease over the early post operative period.

You may contact the registered nurse on duty at the Melbourne Orthopaedic Group on **95293333** Monday to Friday (8.30am to 6pm) for any concerns regarding

- Persistent pain not relieved by the above measures
- Onset of chills, fevers or sweats
- Swelling and or unusual redness around the wound
- Increased numbness or weakness in the fingers,
- Discomfort caused by tight bandages or dressings that have become loose and ineffective
- Any persistent discomfort from your brace, bandages or plaster.

The nurse on duty will give you the appropriate advice, or if necessary suggest you be reviewed urgently. **After Hours please call 95293333.**

## **Sleeping Recommendations**

Wear your sling for as long as your post operative instructions specified. Sleeping discomfort can be reduced by lying on your unaffected side with a pillow between your knees. Place one or two pillows between your forearm and your body to help support your arm.

Alternatively, sleeping in a semi reclined position can be helpful. If you have a recliner chair, many people find sleeping in this can be comfortable. Just remember there is no wrong position to sleep in (so long as your arm is correctly in the sling), just what feels comfortable.

## **Post Operative Wound Care**

The outer layer will be removed prior to your discharge from hospital, with the inner layer changed if required. These inner dressings (cutifilms) should be present for at least 4 days, but if possible leave them intact until your first post operative appointment. If they fall off, they can be replaced with small bandaids.

The innermost tapes (steristrips) are to be removed 10 days following surgery You can remove them yourself or wait until your first post operative appointment. *NB These inner dressings (cutifilms and steristrips) are showerproof - you may gently wash around the area with soap and water ONLY after 5 days following your surgery.*

Suture ends may be visible. The suture material in the skin is dissolvable. The ends will be trimmed off at your first post operative appointment.

Ensure you keep your armpit clean. Your physiotherapist will show you how to do this post operatively.

## **Post Operative Exercises**

In order to make a full recovery from your shoulder operation, it is important to perform the following exercises regularly. Whilst the Surgeon and Physiotherapist will advise you on the specifics of your rehabilitation, you are ultimately responsible to exercise consistently at home each day. These exercises will take you up until your post operative review. Further physiotherapy will be discussed at this time. We suggest that you arrange an appointment with your Physiotherapist in the week following your review to progress your exercises.

**The following exercises are intended to initiate gentle shoulder movement. The aim is to get gentle movement without creating pain. Your physiotherapist may suggest modifications to your program depending upon your specific pain, stiffness or surgery.**

Try to perform the following exercises 2-3 times a day.

### **Hand movements:**

Fully open and close your hand. Repeat 10 times.

Rotate your wrist around in circles, and turn your palm up and down.

### Elbow movement:

Release your sling, then straighten and bend your elbow, with your arm remaining by your side. You can use your good arm to support this movement. Repeat 10 times.



### Shoulder blade exercises:

Bring your shoulder blades back, drawing them together. Hold for 3 seconds. Repeat 5 times.

Shrug your shoulder blades forward and back, up and down and then in circles for 5 seconds each. Repeat each set of movements for 2- 3 minutes



### Pendular swinging:

Stand up and bend well over, supporting your arm with your good arm. Allow your operated arm to hang away from your body.

If this position is comfortable and your arm can relax, then gently start swinging the arm:

- forward and back,
- side to side, and
- in a circular pattern.



Keep the arm as relaxed as possible. Move in each direction for 30 seconds. This complete set of exercises should be repeated 3-4 times per session. You should not feel pain, but a stretching sensation is common.

### Assisted elevation:

Take off your sling. Use your good arm to cradle your operated arm, lift your operated arm forward and upward. **Use the strength of the unoperated arm only.**

If you are lying on your back stop once your upper arm is vertical (90° of elevation).

If you are sitting stop once your upper arm is horizontal.

Ensure you do not 'hitch' your shoulder.

Repeat 5 times.

You should not feel pain, but a stretching sensation is common.



### **Assisted outward rotation:**

With the sling still off, grasp the wrist of your operated arm with your other hand or use a stick.

Gently move the forearm away off your stomach, ***keeping your upper arm by your side***. Stop once your forearm is perpendicular to your trunk (neutral rotation). Stop earlier if you feel pain in your shoulder. You should not feel pain, but a stretching sensation is common.



Repeat 5 times.

### **General advice:**

- Do not try to lift your operated arm by itself. Actively lifting your operated arm by itself will strain your repair and may cause damage.
- Avoid painful activities and exercises at all times.
- Ensure you know how to remove and apply your sling prior to leaving hospital.
- It is usually ok to use your hand to do small things such as typing, assisting with eating and dressing.

If you have any questions regarding your physiotherapy, please contact our rooms during normal business hours on **9009 3871**

### **Uninsured patients:**

Your surgeon has requested that you receive a physiotherapy consultation prior to your discharge to ensure your recovery is as safe and thorough as possible. There will be a consultation fee charged.