



## TOTAL SHOULDER REPLACEMENT SURGERY

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## **FREQUENTLY ASKED QUESTIONS: WHAT TO EXPECT AFTER SHOULDER REPLACEMENT SURGERY**

### **How long will I be in the hospital for?**

Typically, patients stay in the hospital for 2-3 days after the surgery. This is mostly for pain control and to be sure you are safe to go home or to a rehab facility. Your post-op appointment will be scheduled within 14 days from surgery and you will be asked to get x-rays at that time.

### **Who decides if I go home versus a rehab facility?**

A case manager will be assigned to you. This assignment may occur either before your surgery or while you are admitted, but before you are discharged. Their role is to help you go where you will be best suited to recover. People who generally go to a rehab facility are those who do not have someone to help them or stay with them at home. If you are admitted to a rehab facility you will have a team of clinical staff managing your case. You will be discharged to home once you can meet the goals set forth by this team, such as physical and occupational therapy.

### **Can I pick which rehab facility I go to?**

This is dependent on several factors. You can certainly suggest a facility that you may prefer, however, this has to be approved by your health insurance AND the facility has to have availability at the time of your discharge. A case manager will assist you with this.

### **How long will I be in a sling?**

Generally, 3 weeks. You should sleep in the sling as well. The sling should only be removed for hygiene and exercises. If you cannot sleep in bed due to discomfort, consider sleeping in a more upright position, such as a recliner. It is important to not externally rotate (a motion similar to reaching for the seatbelt while in a passenger seat in the car) for the first 6 weeks. A sling will prevent this motion.

### **When can I drive?**

It is unsafe to drive with a sling on. To safely return to driving, you must not be taking any narcotic pain medications, be out of the sling, and able to keep your hands at a safe driving position without discomfort. Typically most people are able to drive at about 4 weeks.



## **WHAT TO EXPECT AFTER SHOULDER REPLACEMENT SURGERY**

### **Will I be able to shower and dress myself after surgery?**

Depending on your pain level, you may remove your surgical dressing and apply a bandage and shower within 2-3 days. Please keep your incision dry for 2 weeks. Please do not “pick” at your incision. NO bathing or soaking or swimming. Please dry off your incision well after your shower and re-apply a dry sterile dressing/bandage. Further instruction will be provided to you at your first post-op appointment and will depend on how well your incision is healing. Please call us if there is any redness around the incision or drainage. You may require some help with dressing initially. You may dress yourself once you can manage.

### **Can I get through airport security or TSA with this prosthesis?**

Yes. Joint replacements are very common now and typically do not pose an issue if you tell TSA you have a metal implant. They can use their wand over that area.

### **When can I return to work?**

You should not expect to carry or lift greater than 20-30 lbs with a shoulder replacement. If you do heavy labor work, plan on 4-6 months out of work but you will have a weight restriction upon your return. Most people are able to return to sedentary work at about 2-4 weeks postoperatively depending on which arm is dominant.

### **How long before I am fully recovered?**

By 3 months most patients are feeling about 80% and are back to daily activities. By 6 months, you should be able to return to your recreational activities (within reason) and maximal medical improvement is at one year.



## **PROPHYLACTIC ANTIBIOTICS PRIOR TO DENTAL VISITS**

It is recommended by the American Academy of Orthopedic Surgeons that you take antibiotics prior to any dental visits (cleanings or procedures) for *at least* the first two years after you have a joint replacement. This is to prevent an infection in your joint.

Typically, we use **amoxicillin** 500mg 4 pills (total of 2000mg) by mouth one hour prior to your visit. If you are allergic to this then we recommend **clindamycin** 300mg 2 pills (total 600mg) by mouth one hour prior to your visit.

This should be repeated every time you go to your dentist. You should call our office 48 hours prior to your visit so we can send a prescription to your pharmacy. Or sometimes your dentist will provide you with a prescription.



**TOTAL SHOULDER REPLACEMENT THERAPY PROTOCOL**  
**Dr. Suzanne L Miller**  
**Boston Sports and Shoulder Center**

**Physical therapy should start as soon as you are discharged from the hospital. Please make arrangements prior to surgery.**

**PATIENT NAME** \_\_\_\_\_

**Physical Therapy: 2-3 times weekly for 10 weeks.**

**Physician Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**SPECIAL CONSIDERATIONS** \_\_\_\_\_

**Stage I (1-2 weeks)**

**Sling to be worn for comfort and sleeping until 1<sup>st</sup> postoperative visit**

When you are home you may remove the sling for tabletop activities within pain tolerance such as eating, brushing teeth, keyboard, and writing.

You may also have your sling off when performing physical therapy exercises

You should remove your sling several times daily for home exercises for the shoulder, elbow and wrist at home

- straighten your elbow
- pendulum exercises
- hand and wrist motion
- Use fingers to climb up the wall

You may take a shower and get the wound wet after 1 week. Do not soak (bath, hot tubs) for 3 weeks

**Physical Therapy Exercises**

A. PROM/AAROM follow specific limits to ROM if ordered

- Pendulum
- Pulleys – flexion and abduction in scapular plane with neutral rotation (palm down)
- Passive forward flexion in supine with neutral rotation
- Wand exercises

flexion – supine and standing  
abduction in scapular plane standing  
extension

**external rotation to 10 degrees** unless otherwise specified

- B. Easy isometric exercises  
ER, extension, flexion and abduction in the scapular plane
- C. Scapular stabilization exercises

### **Stage II (2-6 weeks)**

- A. **AROM**
  - 1. Active flexion in scapular plane (no limit)
  - 2. Gradual increase of activities from supine to vertical
  - 3. Continue isometric exercises
  - 4. Scapular stabilization exercises
  - 5. **No active internal rotation**
  - 6. **External rotation to be limited to 10 degrees**

### **Stage III (6 weeks until 3 months)**

The protocol is now like impingement protocol.

- A. Isotonic shoulder exercises as tolerated.
  - 1. To be performed with free weights
  - 2. Repetitions 20-30 before adding/progressing weights
  - 3. Start against gravity with weight
    - 2 oz. (butter knife)
    - 4 oz. (tuna can)
    - 8 oz. (soup can)
    - 1# weight
    - 2# weight, etc.
- B. Scapular stabilization exercises
- C. Active internal rotation strengthening
- D. May externally rotate beyond 20 degrees (Active, no excessive passive stretch)

### **Stage IV (3months)**

- A. Return to all functional activities (includes golf)
- B. See activity guide after Total Shoulder Replacement
- C. Avoid jamming activities – hammering, contact sports

This protocol provides you with general guidelines for the rehabilitation of the total replacement shoulder patients. Specific changes in the program will be made by the physician as appropriate for an individual patient. If you have any questions regarding the progress of the patient please contact **Dr. Miller at Boston Sports and Shoulder Center 781-890-2133.**

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