Baylor Scott & White
ORTHOPEDIC ASSOCIATES OF DALLAS
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Reverse Shoulder Replacement

REVERSE (RTSA) — POSTOPERATIVE INSTRUCTIONS

Patient _____ **Surgery date** _____ **Side** ☐ Right ☐ Left

WHAT MATTERS MOST IN THE FIRST 6 WEEKS

- Wear the sling at all times, including sleep, for **2 weeks**, except for hygiene, dressing, and exercises.
- **Avoid the dislocation position:** do not reach behind your back with the arm turned in for 12 weeks.
- **Do not** push yourself up from a bed or chair with the operated arm.
- **Prevent falls** — a fall onto the arm is the most common cause of early problems. Clear rugs and cords, use night lights.

MEDICATION

Pain medication

Narcotic/opioid medications (oxycodone, hydrocodone) are habit-forming. If needed, you will receive a one-time prescription sized for your surgery. Most patients need them for only several days; taking them longer than 6 days significantly increases the risk of dependence. **Do not drive, drink alcohol, or make important decisions while taking them.**

Take 1–2 tablets every 4–6 hours as needed for pain.

☐ Oxycodone ☐ Percocet (oxycodone/acetaminophen) ☐ Norco (hydrocodone/acetaminophen)

☐ Other _____

Tylenol (acetaminophen)

☐ You may add Tylenol 325 mg, 2 tablets every 4–6 hours. Do not exceed 3,000 mg in 24 hours *from all sources*.

☐ Do NOT take extra Tylenol — your prescribed pain medication already contains acetaminophen.

Anti-inflammatories (NSAIDs: ibuprofen/Advil/Motrin, naproxen/Aleve, meloxicam/Mobic)

NSAIDs can slow tendon and bone healing and increase bleeding risk; they are approved only for specific patients.

☐ NSAIDs approved ☐ NSAIDs **NOT** approved

Blood clot prevention

☐ **Aspirin 81 mg once daily** for 4 weeks

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☐ Lovenox _____

☐ Continue your home blood thinner

☐ No blood clot medication needed for your procedure

Nausea & constipation

You have prescriptions for **Zofran** (nausea — fill only if you have severe nausea) and **Colace** (stool softener while taking narcotics). Walking, fluids, fiber, and prune juice also help; MiraLAX is OK if no bowel movement in 2–3 days.

Other: _____

ACTIVITY & HOME EXERCISES

Ice / cold therapy

☐ **Cooling unit:** use in 4-hour intervals with 30-minute breaks for the first 1–2 weeks, then as needed. Keep a layer between the pad and your skin. **Do NOT** leave on overnight.

☐ **Ice packs:** 20 minutes on / 20 minutes off as needed for the first 2 weeks. Ice works through thick bandages even if you can't feel the cold.

Do NOT use heat on the shoulder.

Nerve block: Your arm may be numb and heavy for 12–36 hours. Keep it in the sling and protect it — you cannot feel heat, cold, or pressure. Start your pain medication in the evening, before the block wears off. Mild shortness of breath or hoarseness on the first day can occur; **call 911 for significant trouble breathing.**

- **Do NOT** actively lift the operated arm away from your body unless you are with your doctor or physical therapist.
- Place a pillow behind the elbow when lying down. Many patients sleep better in a recliner or propped up for the first few weeks.
- **Hand, wrist, and elbow:** open and close your hand, bend and straighten the wrist and elbow, 10 times each, every hour you are awake (remove the arm from the sling for this, keeping the shoulder still).
- To wash the armpit or dress, lean forward and let the arm hang gently — do not lift it with your shoulder muscles.
- Dress the operated arm first and undress it last. Loose button-up shirts are easiest.

☐ **Pendulums** may begin _____ : lean forward, let the arm hang relaxed, and gently swing in small circles. 1–2 minutes, 3 times a day.

☐ **Elbow, wrist, and hand only** until your first visit.

- You may use the hand for light tasks in front of the body (eating, typing, writing) with the elbow at your side, unless told otherwise.
- **Driving:** no driving while wearing the sling or taking narcotic pain medication. Typically about 2–4 weeks, once out of the sling and off narcotics.

PRECAUTIONS FOR YOUR REVERSE SHOULDER REPLACEMENT

A reverse shoulder replacement is most likely to dislocate when the arm is brought **behind the body and turned inward**, especially while pushing. The muscles around the new joint need time to strengthen.

For the first 12 weeks:

- Do **not** reach behind your back with this arm — no tucking in a shirt, fastening a bra behind you, or wiping behind with this hand.
- Do **not** push yourself up from a bed or chair with this arm, or push the elbow back while getting up.
- When lying on your back, keep a small pillow or towel behind the elbow so the arm does not drop behind your body.
- Do **not** lift anything heavier than a cup of coffee with this arm.

Call us if you feel a clunk followed by a sudden loss of motion, or new pain on the **top of the shoulder** that comes on suddenly or with activity — these can signal a dislocation or a stress fracture of the shoulder blade (acromion).

SLING

☐ Sling at all times, including sleep, for **2 weeks**. Remove for hygiene, dressing, and exercises. Your therapist will help you wean out of it.

☐ Other: _____

SHOWERING & DRESSING CARE

Showering

- You may shower 2 days after surgery. Do not rub the incision; pat dry.
- Lean forward and let the arm hang to wash under the arm. Put the sling back on afterward.
- **No baths, pools, or hot tubs** for 3 weeks, and until incisions are healed.

Dressing

☐ **Waterproof dressing (e.g., Aquacel):** you may shower over it. Leave on for **7 days**, then remove and cover with a dry dressing.

☐ **Gauge dressing:** keep dry. Remove at 7 days and apply a new dry dressing.

PROTECTING YOUR NEW JOINT

- Let your dentist and other doctors know you have a joint replacement. Avoid elective dental work for 3 months after surgery; call our office before dental procedures for guidance on antibiotics.
- Any infection elsewhere (skin, urinary, dental) should be treated promptly — tell the treating doctor about your joint replacement.

PROCEDURES PERFORMED

- ☐ Reverse total shoulder replacement
- ☐ Biceps tenodesis
- ☐ Subscapularis repair
- ☐ Other: _____

DIET

- Eat lightly the day of surgery, then advance to your regular diet. Drink plenty of non-alcoholic, caffeine-free fluids.
- A well-balanced, protein-rich diet supports healing. Avoid new supplements in the early recovery period unless cleared by your surgeon.
- If you have diabetes, check your blood sugar more often — surgery and steroids given during anesthesia can raise it.

PHYSICAL THERAPY

- ☐ Begin physical therapy within **7–10 days**. Your prescription and protocol are in your post-op packet.
- ☐ Home exercise program until your first visit; formal PT will be prescribed at that visit.

FOLLOW-UP

Your first post-operative appointment: **Date** _____ **Time** _____ **Location** _____

- To change your post-operative visit, call **469.800.7200**.
- Pain medication refills: call Monday–Friday, 8:30 am–3:00 pm. Allow 24–48 hours. Narcotic refills are not available after hours or on weekends.

WHEN TO CALL US — 469.800.7200, DAY OR NIGHT

- Fever over 101.5°F, or chills
- Redness spreading from the incision, red streaks, foul odor, or drainage that keeps increasing after day 3
- Calf pain, tenderness, or swelling
- Pain or swelling not relieved by your medication, ice, and elevation
- Hand or fingers that is cold, pale, or blue, or numbness/weakness that is worsening (mild numbness around the incisions is expected)
- Bleeding that soaks through the dressing

If you cannot reach the on-call surgeon promptly and you are concerned, go to the nearest Emergency Room.

CALL 911 IMMEDIATELY FOR CHEST PAIN OR SHORTNESS OF BREATH.

SPECIFIC INSTRUCTIONS

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Please read these instructions carefully before calling the office — most common questions are answered here. Thank you!