



Orthopedic Surgery • Sports Medicine
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Post-Operative Instructions – Shoulder/Clavicle Fracture Fixation

Bandages & Ace Wrap:

Your post-operative dressing has two layers. First, your incisions were closed with stitches. Second, your incision is covered with an adhesive dressing. Your dressings should be left in place you are seen by your doctor. Once your dressings are removed in the office, you do not have to cover your shoulder unless the skin is irritated by your clothes or if you will be in the sun for long periods of time. Your skin will be extra sensitive to the sun until fully healed so take extra precaution.

Brace:

A sling is used to protect your shoulder after surgery. The sling is to be worn at all times except for bathing. Your sling will be removed gradually over time as the bone heals. This sling will be used for approximately 4-6 weeks. Your therapist will give you instructions regarding weight-bearing, range of motion, and other exercises.

Washing & Bathing:

You will be seen in the office a few days after surgery. You may shower by covering plastic over the dressings. It will be awhile before you can take a full shower, so be patient. Once your dressings are changed in the office, you can shower without covering your shoulder. You can use soap on your shoulder and over the Steri-Strips. This shower should be quick. Do not take a bath or use a swimming pool until 1 month after surgery. Because lake and ocean water contain bacteria, avoid these for 6 weeks after surgery.

The yellow discoloration you will find on your arm is a long lasting surgical prep called ChlorPrep. This is used because it will kill bacteria on your skin hours longer than old fashion iodine surgical preps. This yellow discoloration will not come off with soap and water, instead you will need rubbing alcohol to remove it.

Physical Therapy

Most patients will see the physical therapist soon after surgery. This is so you can start the rehabilitation process right away. At this appointment, your therapist will teach you exercises that will be important to do regularly before surgery and right after surgery. Regular physical therapy will begin after 2 to 3 weeks, and you will start range of motion, stretching, and strength exercises on your first visit.

Follow up appointment:

I want to see my patients in the office 4 to 5 days after surgery. Sometimes I find other issues with your shoulder that we did not anticipate. When these unforeseen circumstances occur, I may want to see you in the office sooner than originally planned.

Nausea:

Nausea can be a side effect from the anesthesia and pain medications. You will be prescribed Zofran (ondansetron) which can be used if you develop these side effects. This medicine should be taken as needed after surgery.

DVT Prophylaxis – Prevention of Blood clot following surgery:

The risk of a leg blood clot following minor surgery is very rare. The majority of patients that suffer this complication usually have a prior history of a blood clot, a positive family history of DVT, or other unusual risk factors. The medical literature is unclear what method of prevention is best and you will find that each surgeon does this a little different.

You should start the Aspirin the next morning after surgery.

- Take one 81mg aspirin every day for 30 days
- Take one 325mg aspirin every day for 30 days
- Take one 325mg aspirin twice a day for 30 days

What to watch out for:

- Pain that is increasing every hour in spite of the pain medication
- Pain or swelling in your calf
- Fever greater than 101°
- Increasing pain with walking
- Unable to keep food or water down for more than one day

Who to Call for Questions and Problems:

If you are having problems or have questions, please call our office at 813-684-3707 (Brandon/Riverview office) or 813-633-0286 (Sun City office) and our nurse will help you. We realize the after surgery some problems or questions are urgent and can not wait until normal working hours. Under these circumstances please call 813-684-3707 anytime (24 hours a day, 7 days a week) and the doctor on-call or I will return your call. If you do not receive an answer within 20 minutes there may be a problem with the beeper so please call again. If an emergency were to occur you can always go straight to the emergency room for immediate attention.

Driving:

After wrist fracture fixation, your ability to drive will be delayed. You will be allowed to drive after meeting several criteria. First, you must be weight bearing as tolerated. This ensures that, in the case of an emergency, you can remove yourself from the car safely. Second, you are no longer using the sling as part of your rehabilitation. Driving with the sling can be uncomfortable and dangerous. Third, you have stopped taking the narcotic pain medication. Fourth, you should not drive until the pain in the shoulder has decreased to a tolerable level and

you can move past the neutral position comfortably. *It is critical to protect the fixation for the first 12 weeks after surgery.* The first time you drive, test your skill in an empty parking lot with another passenger.