**Instructions for Surgery**

You have been scheduled for a Total Shoulder Arthroplasty with Dr. Duquin at the Ambulatory Care Center located at the Erie County Medical Center (ECMC). We hope this information sheet will serve as a helpful guide before and after surgery.

**Preparation for Shoulder Replacement Surgery**

We encourage you to attend the **shoulder joint replacement class** offered through the hospital. We will provide you with the dates and times of the class, which takes place at ECMC.

**Four to six weeks before surgery, we will arrange for a** **CT scan of your shoulder at ECMC**.

**Three weeks before surgery, we will make an appointment for pre-operative testing at ECMC**. You will undergo blood work, a chest x-ray and an EKG. Please bring a list of your current medications to your pre-operative visit.

**Two weeks before surgery, we will arrange for an appointment with your primary medical doctor**. Your primary medical doctor must authorize medical clearance for the surgery. Please discuss with your doctor which of your regular medications you should take with a small sip of water on the morning of surgery and which medications can be skipped on that day.

**One to two weeks before surgery, you will have your final pre-operative visit with Dr. Duquin**. During this visit, Dr. Duquin will answer any questions you may have regarding your surgical procedure and rehabilitation. You will also receive final instructions regarding your procedure and the time that you should arrive at the hospital on the day of surgery.

**One week before surgery, you must stop taking any medications that interfere with blood clotting** (aspirin, oral anti-inflammatories such as Advil and Aleve, Coumadin and Plavix). If you are currently taking an anticoagulant, please let our office know.

**Please note**

* Your surgery could be cancelled if you have an active infection. If you suspect that you have an infection at any time before your surgery date, contact our office so we can arrange appropriate treatment.
* Routine dental work is discouraged for 3 months following surgery. Please make sure your dental visits are up to date prior to your surgery.
* Studies show that cigar and cigarette smoking increase the risk of complications during shoulder replacement surgery. Smoking interferes with wound healing and tissue recovery. **We strongly encourage you to quit smoking prior to your surgical procedure**. At the very least, we ask that you avoid cigarettes and secondhand smoke at least two weeks BEFORE and four weeks AFTER surgery. If that is not possible, please refrain from smoking for at least 12 hours before your surgery. If you are interested in quitting, but find it difficult, please ask your primary care doctor for resources that can help.

Your Surgery and Hospital Stay

The surgery will be performed in the Ambulatory Care Center at the Erie County Medical Center, (ECMC), 462 Grider Street, Buffalo, NY 14215. You can arrive through driveway #2. Patient parking is available in the lot in front of the Ambulatory Care Center. A map of the hospital campus is attached for your reference.

* **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT the evening before surgery.** If you fail to do this, your surgery will be cancelled and rescheduled.
* Please carefully wash your shoulder and underarm region the night before surgery and again on the morning of surgery with an antibacterial soap, such as Dial. Please do not apply deodorant.
* Please remove all jewelry prior to arriving for surgery – including rings. Keep all your valuables at home. Only bring with you what is necessary.
* Nail polish may remain on, but please remove any artificial nails.
* Your arrival time is between 2 and 3 hours before the planned time for your surgery. This allows ample time for you to complete the hospital registration. We will confirm the exact arrival time ahead of your surgery.
* Be sure to bring your insurance cards.
* If you have a living will, please bring a copy of it with you. The nursing staff will ask you about resuscitation and your willingness to have a blood transfusion, if needed. If you have a healthcare proxy, we will also need that contact information.

After you have been prepped for surgery, you will meet with Dr. Duquin and sign a consent form for your procedure. The surgical site will be marked by Dr. Duquin after the consent form is completed.

You will also meet with the anesthesiologist before surgery who will discuss your anesthesia and ask questions about your medical conditions. **Please let the anesthesiologist know if you have ever experienced any side effects from anesthesia or pain medications.** The anesthesiologist may discuss with you the option of a regional nerve block for pain control during and after the procedure. This is an option, not a requirement for the surgery.

During the surgery, your family and friends can monitor your progress in the surgical waiting room using the computerized tracking system. Dr. Duquin or a member of his team will meet with your family at the end of the surgical procedure to update them on your condition. Your family and friends will not be allowed in the recovery room. They will see you when you are ready to go to your room a few hours after surgery.

Your room will be located on the 6th floor of the main hospital building. The rooms are all private rooms and family members are welcome to stay overnight with you.

You will have a drain in the surgical site to prevent hematoma formation. The drain will be removed by Dr. Duquin’s surgical team on the morning after surgery.

Your shoulder will be in an immobilizer after your surgery. Physical and occupational therapy specialists will teach you how to apply and remove the shoulder immobilizer. They will instruct you on how to perform personal hygiene activities. They will also teach you shoulder exercises that will aid in your recovery.

The plan for your discharge from the hospital will be coordinated with the discharge planners. Most patients are discharged before 12:00 pm on the day after surgery.

**When You Get Home**

Please keep your surgical dressings intact after you go home. It is important that the incision remain clean and dry. Do not shower for 3 days. You may remove the dressing on the 4th day and allow the incision to get wet in the shower. Avoid submerging your shoulder in a bath tub or in a swimming pool for at least 3 weeks.

The incision is closed with absorbable sutures and sealed with surgical glue. The steri-strips over the incision will fall off within 1-2 weeks after the surgery.

If there is any active drainage from the incision, redness, or if you have any other concerns with the surgical incision, please contact Dr. Duquin’s office.

The shoulder immobilizer must be worn for 6 weeks after the surgery. You may remove your immobilizer during the day for hygiene, dressing and to perform the home therapy exercises. Please avoid active use of the arm when it is out of the immobilizer to avoid damaging the soft tissue.

Prescriptions for pain medication, stool softeners and aspirin will be sent to your pharmacy at the time of your discharge. Pain medications should be used only as needed. Most patients start to wean off the medications within a few days after the surgery. Most of our patients no longer need pain medication 2-3 weeks after surgery. Prescription pain medications are not prescribed by our office after 8 weeks following the surgical procedure.

You will not be able to drive while in the immobilizer or while on pain medications.

**Post-Operative Follow-Up**

**Your post-operative visit will take place 1-2 weeks after surgery with Christine Ehrensberger, Dr. Duquin’s physician’s assistant**. Most patients begin outpatient physical therapy following this visit. A prescription and instructions for the physical therapist will be provided at the post-operative appointment. Most patients are in physical therapy for an average of 4 months.

Follow-up visits and radiographs are important to ensure that the replacement is functioning appropriately. Routine follow-up visits after shoulder arthroplasty are at 6 weeks, 3 months, 6 months, 1 year, 2 years, 5 years and 10 years.

**Avoid any invasive procedures such as dental work, a colonoscopy or urinary tract procedures for 3 months after surgery**. If an emergency procedure is needed, you must take antibiotics before the procedure to prevent infection.

Taking antibiotics prior to dental procedures that occur three or more months after the surgery is not currently required by the American Academy of Orthopaedic Surgeons and the American Dental Association. However, we recommend that you take 2 grams of Amoxicillin 30 minutes prior to any dental procedures the for the rest of your life to prevent infection.

Cards for airport security are no longer used.

We use an electronic questionnaire, called OBERD, to help us improve your health. Be sure to check your email inbox for a message from our office about OBERD. Filling out the questionnaires at home prior to your appointments makes your follow-up appointments more efficient. These questionnaires help us track how you are progressing through your rehabilitation after surgery and beyond. If you do not complete the forms at home, we will ask you to do so at your follow-up appointment in the office.

**Restrictions**

**0-6 weeks:** Immobilizer, no lifting or use of arm.

**6-12 weeks**: You can use your arm for light activity (less than 2-3 pounds) but avoid pulling across body against resistance.

**After 3 months**: You can start lifting 5-10 pounds and progress activities as tolerated over the next 6-8 weeks to full activity.

**Lifetime restrictions**: Avoid any activity that causes pain or discomfort. Avoid strenuous activity or lifting to prevent premature wearing of the implants. A guideline is to limit lifting with the surgical arm to less than 25lbs. If you have questions about specific activities, please contact our office.

If you have any additional questions, or if you wish to speak to a patient who has had a shoulder replacement performed, please contact our office at: 716-898-4426.

**Medication list for:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Medication Name | Dosage | How often do you take it? | Why do you take it? | Any problems with taking the medication? | Doctor that ordered the medication | Date it was started |
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**Please list all medications taken regularly and as needed above**

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Pharmacy I use: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pharmacy phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Common Aspirin-Containing or Aspirin-Like Substances

Arthrotec Disalcid Lodine Telectin

Advil Duralgesic Lovenox Toradol

Aspirin Ecotrin Methotrexate Triaminicin

Aleve Effient Midol Vitamin E

Alka-Seltzer Equagesic Motrin Voltaren (Diclofenac)

Anacin Etodolac Mobic (Meloxicam) Tart Cherry

Arthritic Pain Formula Feldene (Piroxicam) Naprelan

Ascription Finoinal Naprosyn

Bayer (Aspirin) Fish Oil (Omega 3) Naproxen Sodium

Bufferin Garlic Tablets Norgesic

Butazolidin Ginger Tablets Nuprin

Celebrex Gingko Bilboa Orudis

Clinoril Ginseng Percodan

Coriciden Glucosamine Persantin

Chondroitin Humeria Plavix

Darvon Ibuprofen Relafen

Daypro (Oxaprozin) Indocin Sine-Aid