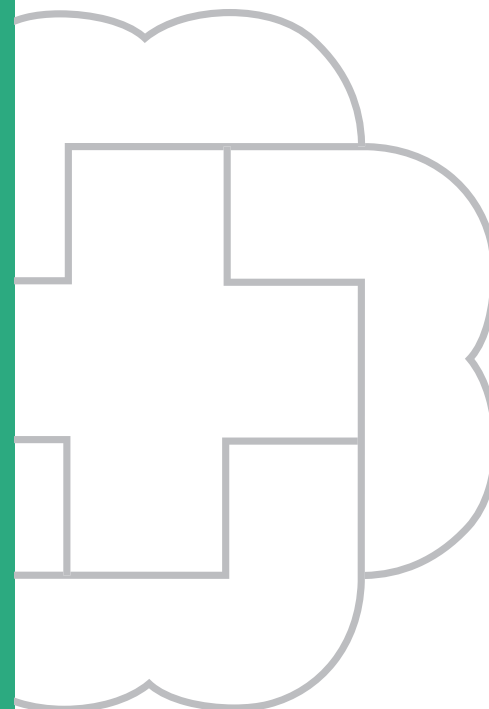




Bronson Battle Creek  
300 North Ave.  
Battle Creek, MI 49017

[bronsonhealth.com](http://bronsonhealth.com)

# Bronson Shoulder Replacement Guidebook

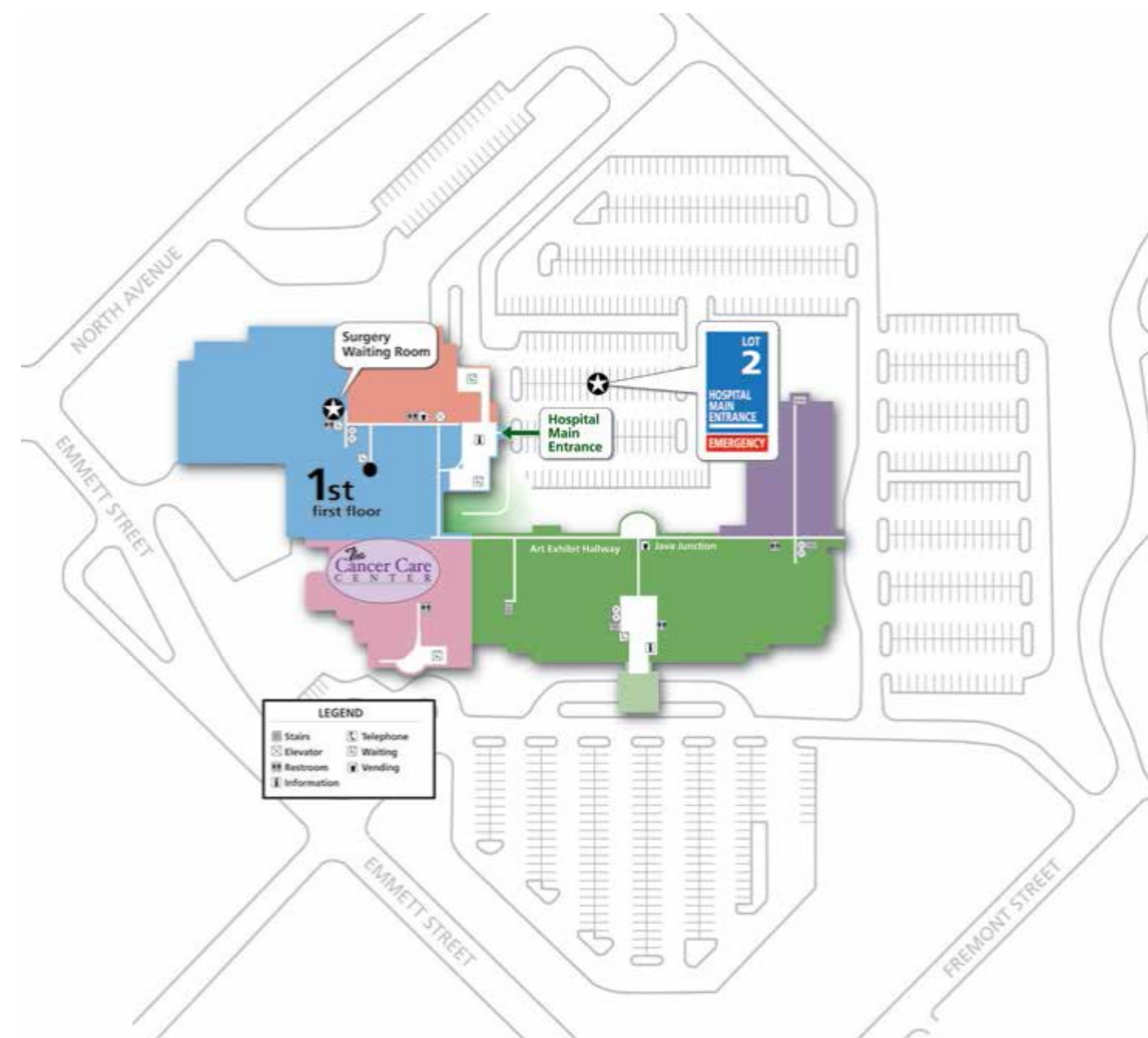




# Bronson Battle Creek Map and Parking

## Finding Inpatient Surgery

- Park in Lot 2. Look for the blue banners.
- Inpatient surgery is located on the first floor. Enter through the main entrance of the hospital. Walk down the hallway (past Radiology).
- The waiting room will be directly ahead of you.



# Bronson Shoulder Replacement Guidebook

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## Welcome

Thank you for choosing Bronson for your shoulder surgery. When you or a loved one suffers from a painful shoulder, simple daily activities can be hard to do. Bronson's approach to shoulder care is focused on you, the patient. We will work with you and your family to set realistic goals. This will help get you on the road to recovery.

Use this book as a guide to help get ready for your surgery and healing after surgery. Talk to your surgeon or an office staff person if you have any questions about your condition.



### Nurse Navigator

Bronson offers support for patients through our nurse navigator. If you have any questions about your surgery or your recovery, please call the Bronson Orthopedic Nurse Navigator Torri Rhoades at **(269) 245-4270**.

## When to Call:

### Call Your Surgeon (877) 704-3133 (24 hours/day number) If You Have:

- Redness, uncontrolled swelling, or increasing pain in the incision.
- A temperature above 101.5 degrees Fahrenheit.
- A bad smell or pus coming from your incision.
- An incision that separates or breaks open.
- A rash or itching from my medicines.
- Been taking stool softeners and have not had a bowel movement in four days.

### Call Your Primary Care Doctor If You:

- Develop dizzy episodes or fainting while standing.
- Develop nausea and vomiting that will not go away.
- Have problems with controlling your blood sugar or blood pressure after surgery.

### CALL 911 IF YOU:

- Have chest pain or difficulty breathing.
- Have sudden weakness on one side of my body, facial drooping and/or slurred speech.

### Useful Telephone Numbers

Bronson Orthopedic Specialists (24/7 number).....	(877) 704-3133
Bronson Orthopedic Nurse Navigator.....	(269) 245-4270
Bronson Battle Creek (Switchboard).....	(269) 245-8000
Bronson Pre-Admission Center.....	(269) 245-5909
Bronson Battle Creek On-Call Anesthesiologist.....	(269) 245-3321

### MyChart

You may also message your providers through MyChart. You may even send pictures if needed. If you don't have MyChart set up, go to [mychart.bronsonhealth.com](http://mychart.bronsonhealth.com) or call Bronson Health Answers at (269) 341-7723 to set it up.

## Frequently Asked Questions

**Q: Can I drive?**

A: You should not drive until you have seen your surgeon for your postoperative appointment. You should not drive if you are still required to wear your sling. You should not drive if you are still taking pain medicine.

**Q: How should I take care of my incision?**

A: Wash your hands frequently. Do not touch your incision. Leave your dressing on until instructed to remove it by your surgeons office.

**Q: Can I shower?**

A: Follow your surgeon's instruction for showering. Most patients will be allowed to shower within three days after surgery. You should not scrub or soak the incision. Pat the incision dry with a clean towel.

**Q: How should I sleep?**

A: You should use pillows to support your arm when lying in bed or sleeping in a chair. You will need to wear your sling while sleeping.

**Q: Should I expect swelling or bruising?**

A: Swelling and bruising is common after surgery. You may notice swelling or bruising all the way down your arm and in your fingers. You should apply an ice pack to your shoulder to help with swelling. Don't keep the ice on for more than 20 minutes at a time.

**Q: Does my insurance need to approve my surgery?**

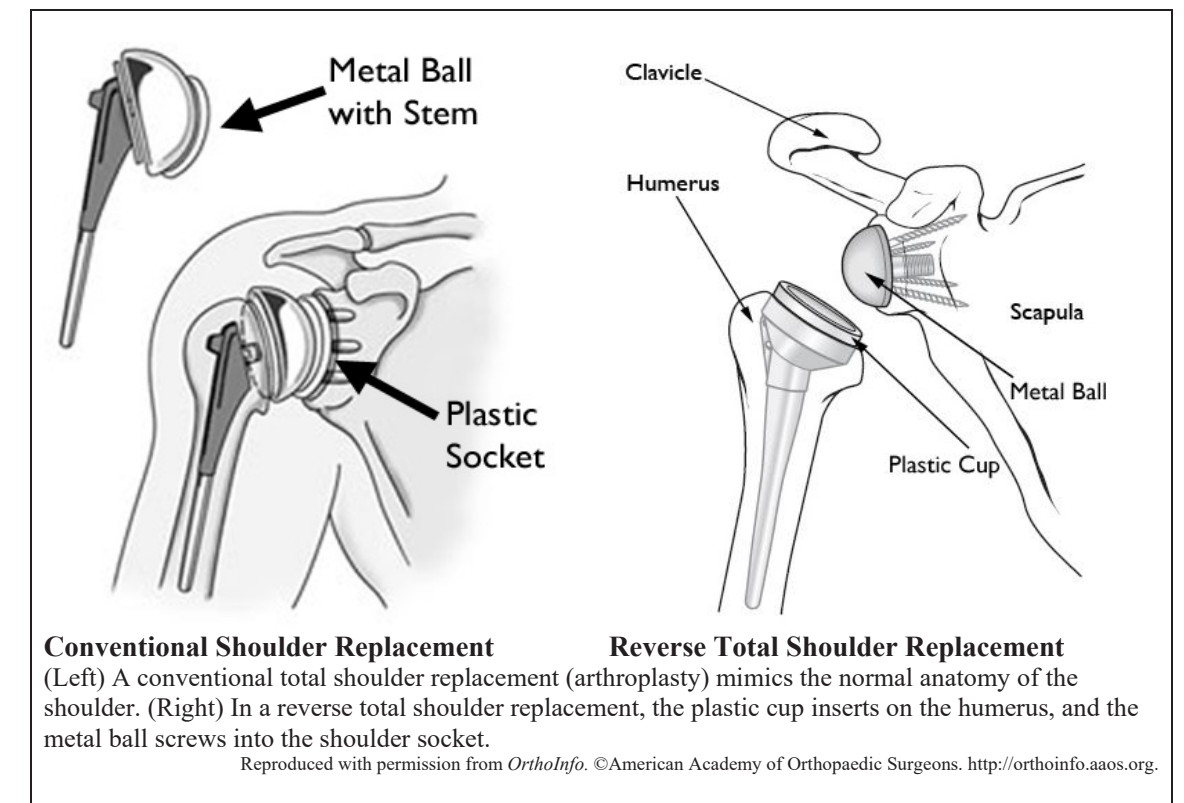
A: Some insurance require a prior authorization. If your insurance requires this, the surgeons office will work to obtain it.

**Q: Does Bronson offer a prescription filling service?**

A: Bronson Battle Creek Outpatient Pharmacy is able to fill new prescriptions Monday-Friday 8am-4pm for patients discharging if your insurance participates. If you are unsure if your insurance participates and your are interested in this service, please contact your insurance company to ask.

## Why Have Shoulder Replacement Surgery?

A painful shoulder is putting limits on your life. You and your surgeon have decided that shoulder replacement is the right choice for you. This is surgery that treats a damaged joint (the site where two bones meet). Shoulder replacement surgery is also called shoulder arthroplasty. The two most common types of shoulder replacement surgery are anatomic shoulder replacement and reverse shoulder replacement. Your surgeon will tell you more about what surgery you will be having. Read on to learn more about your surgery.



# Understanding Shoulder Replacement Surgery

## Anatomic Shoulder Replacement

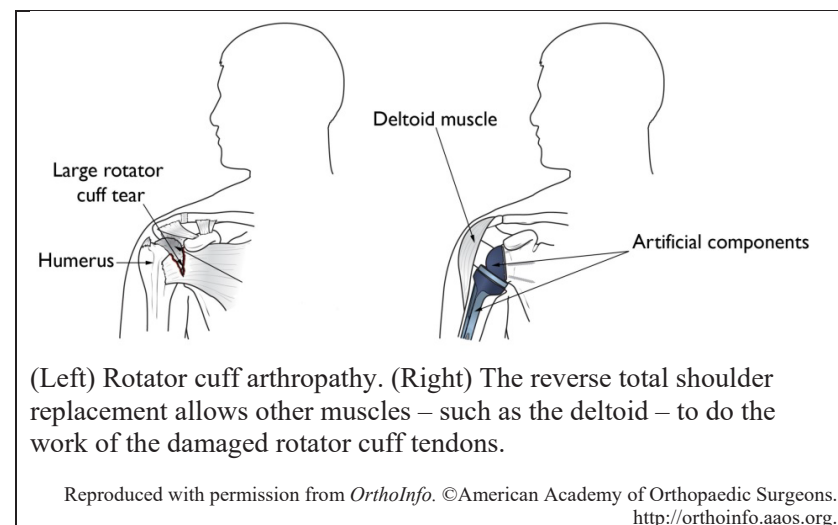
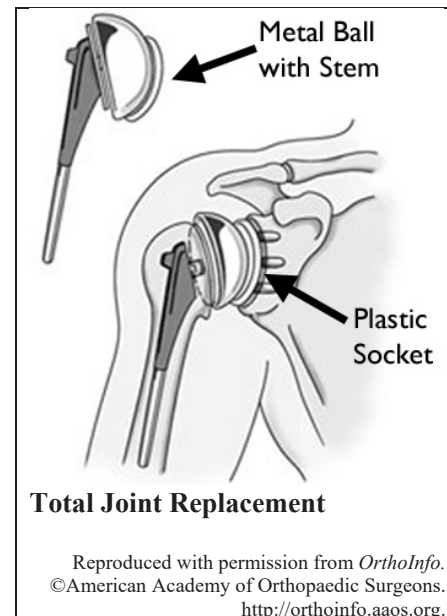
This surgery removes damaged bone and cartilage in the shoulder joint. A metal implant replaces the head, or ball, of your humerus (upper arm bone). The socket is replaced with a plastic insert. With new smooth surfaces, the bones can once again glide easily. The surgery is intended to help you regain motion, improve function, and reduce your pain.

## Shoulder Hemiarthroplasty Resurfacing

This surgery resurfaces the damaged bone at head of your humerus. The surface of the head of the humerus is replaced with a cap-like implant.

## Reverse Shoulder Replacement

This surgery is most often used for patients with severe arthritis from a chronic rotator cuff tear. The rotator cuff muscles can no longer hold the joint in place during movement. The tear may also weaken the shoulder joint and keep it from moving normally. The anatomy of the shoulder (ball and socket) is reversed during the surgery. The ball is attached to the scapula (shoulder blade) instead of the humerus (upper arm bone). A smooth, socket-like surface is attached to the top of the humerus.



# Caring for Yourself After Surgery

## Prevent Infection

Infection is a serious concern after surgery. This happens only a very small percent of the time. You can do the following things to help prevent infection:

- Hand washing/hand sanitizing.
- Be mindful of pets being near your surgery site. Avoid sleeping with pets the night before surgery and 1 week after surgery.
- You should not have any dental appointments within 3 months after surgery. You will need antibiotics prior to dental appointments in the future.

## Prevent Constipation

Constipation following surgery is common. You should eat a well- balanced diet and drink plenty of fluids. You can do the following things to help prevent constipation:

- Increasing your fiber can help prevent constipation (fruits, vegetables, bran, and prunes/prune juice).
- Take a stool softener (e.g. Colace) or a laxative (e.g. Miralax, Senokot).

## Prevent Breathing Problems and Pneumonia

- Take a deep breath in 10 times and then cough deeply every one to two hours while awake.
- Be active as soon as possible after surgery; you will be up and walking shortly after surgery with the staff.
- Changing your position helps you breathe deeper. Sitting in a chair and walking allows your lungs to open more than when you are laying in the bed.
- Do not smoke. Smoking slows the healing process.

## Activity and Precautions Following Surgery

### Sling

- You may be required to wear a sling after surgery.
- Your surgeon will tell you when you can stop wearing the sling. You may need to wear your sling for up to six weeks.
- You will be given specific instructions prior to discharge from the hospital about how long you will have to wear your sling.
- Do not drive while you are required to wear the sling.
- Here is the link for sling use you can watch online if you would like to: <https://youtu.be/Di1r2ZxpnfE>



### Activity/Positioning

- Place a small pillow or towel roll behind the elbow to keep your arm in a neutral position when you lie down or sleep.
- Do not lift anything heavier than a coffee cup with your surgical arm. You can bend your arm at the elbow.
- Do not move your arm behind your back.
- Do not use your operative arm to support your body weight.
- Perform your exercises at home that are on page 11.
- Please follow your surgeons instructions on other restrictions you may have.

### Getting Dressed

- Here is the link for dressing you can watch online if you would like to: [https://youtu.be/GX\\_YYsv4Usk](https://youtu.be/GX_YYsv4Usk)
- Pants with an elastic waist band work the easiest to pull up.
- Button-up or oversized T-shirts will be the easiest to put on.
  - To put your shirt on:
    1. Remove your sling.
    2. While your surgical arm is dangling, put your surgical arm through the arm hole.
    3. Put your head through the head hole in your shirt.
    4. Put your non-surgical arm through the other arm hole.
    5. Use your non-surgical arm to pull shirt down over your abdomen and back.

## Getting Ready for Surgery

### Pre-surgery Testing and Appointments

Before your surgery, you will have some testing done. You will have blood drawn and a nasal swab test. You will also have an EKG (electrocardiogram) to check your heart.

We may schedule an appointment with your primary doctor and other medical specialists to make sure you are healthy enough for surgery. For your safety, your surgery may need to be rescheduled due to a medical reason. Your healthcare team will work with you to get you ready and reschedule your surgery if necessary.



### Preparing yourself and your home

We want you to have the best outcome after your surgery. The more prepared you are for surgery, the smoother your recovery will be. These are things you can do to get ready.

- ✓ Choose a coach. Your coach can be any one you choose. Your coach should be someone who is available to assist you after you leave the hospital.
- ✓ You should have help at home for at least three to five days. They should be able to help with meals, showering and driving to follow-up appointments.
- ✓ Complete Shoulder Replacement Education Class either online or in person.
- ✓ Prepare your home for your return after surgery. Remove potential tripping hazards. Have a plan to secure pets that may jump and cause you to be unsteady when you return home.





## Nerve Block Care

### If you do receive a nerve block:

You may be able to move your fingers and may have some feeling in them. They may not feel normal to you while the nerve block is in place. The thumb is usually the finger that feels the numbest. Some patients describe their fingers as feeling “fat” as the medicine wears off. The nerve block will not usually take away all of your pain. It is normal that you will use some of the pain pills prescribed by your doctor while you have the block in place.

### Safety Information

The pump delivers a medicine that blocks the feelings of pain, hot and cold. It also numbs the feeling of being touched and changes muscle strength. Treat your arm as if it were broken. You must protect the operative arm from injury caused by:

- Heat or cold
- Hard or rough surfaces
- Awkward positioning
- Lifting

### Contact the On-call Anesthesiologist at (269) 245-3321 If You Have:

- Swelling, extreme tenderness, redness, or drainage from the catheter tube site that is bloody or infected. A small amount of redness or clear drainage is expected.
- Ringing in your ears.
- Numbness or tingling around your lips.
- A metal taste in your mouth.
- If you feel faint.
- Difficulty removing the catheter.

### Pump Information

- The medicine in the pump will last about 3-4days.
- Keep the catheter tube site and dressing dry. Do not shower while the tube is still in place.

### Removing the Catheter Tube

- Remove the catheter tube when the pump is empty. You may remove the catheter tube at any time before this if you wish. Remove the catheter tube no later than 4 days after your surgery.
- To remove the catheter tube:
  - Wash your hands.
  - Remove the dressing.
  - Gently, but firmly pull out the tube. A small amount of drainage or blood is common.
  - You may place a small bandage over the removal site.

## Pre-surgery Shower Schedule

You will be given a free bottle of chlorhexidine wash from your surgeon’s office. Start by completing your regular shower first, using your normal soap and shampoo. Next, follow the instructions in the grid below. Each time you use the wash, let it sit on your skin for 1-2 minutes. Then rinse the product off.

	Days Before Surgery	Date	Instructions	Done ✓
Joint Area - 1 Teaspoon	7		Clean your surgery joint area with 1 teaspoon (about ¼ medicine cup) of chlorhexidine wash. OK to apply lotion.	
	6		Clean your surgery joint area with 1 teaspoon (about ¼ medicine cup) of chlorhexidine wash. OK to apply lotion.	
	5		Clean your surgery joint area with 1 teaspoon (about ¼ medicine cup) of chlorhexidine wash. OK to apply lotion.	
	4		Clean your surgery joint area with 1 teaspoon (about ¼ medicine cup) of chlorhexidine wash. OK to apply lotion.	
	3		Clean your surgery joint area with 1 teaspoon (about ¼ medicine cup) of chlorhexidine wash. OK to apply lotion.	
Neck Down - 1 Tablespoon	2		Shower and wash your body from the neck down. Avoid your eyes, ears, mouth and genitals. Use 1 Tablespoon (about ¾ medicine cup) of chlorhexidine wash. OK to apply lotion.	
	1		Shower and wash your body from the neck down. Avoid your eyes, ears, mouth and genitals. Use 1 Tablespoon (about ¾ medicine cup) of chlorhexidine wash. OK to apply lotion if needed. Change the sheets on your bed. No pets in bed.	
	<b>Morning of Surgery</b>		Shower and wash your body from the neck down. Avoid your eyes, ears, mouth and genitals. Use 1 Tablespoon (about ¾ medicine cup) of chlorhexidine wash. Do not apply lotion.	

## Day of Surgery

- **Do not eat anything after midnight before your surgery.** This includes gum, candy, mints, cough drops and tobacco products.
- The preadmission nurse will let you know about fluids you can drink before surgery. If you do not remember the instructions from the nurse, do not drink anything the day of your surgery.
- Plan to arrive 2 hours before your scheduled surgery time.
- Leave jewelry and valuables at home.
- Bring with you:
  - Your photo ID and insurance card
  - Eyeglasses and/or denture case
  - A copy of your Advance Directives
  - Your list of medicines
  - If you are scheduled to stay overnight: pack a bag with a change of clothes and any toiletries you may want. If you use a CPAP machine, pack this in your overnight bag. You may leave this bag in your vehicle and your coach can bring it to you after surgery.

### Parking and Entrance

- Park in Lot 2 (same lot as the Emergency entrance)
- Enter the hospital through the main entrance “Bronson Battle Creek Hospital Entrance”
- Walk straight down the hall to the surgery waiting room

### Pre-Surgery area

- A staff member will bring you back to the pre-op room. This is where you will change into a patient gown. A visitor may be with you in the preoperative area.
- To help prevent infection, the nurses will give you antibacterial cloths. They will show you how to wipe your body with them. The nurses will also give you nose swabs and have you rinse your mouth with a special mouthwash.
- You will meet with the anesthesiologist. He/she will talk with you and answer any questions you may have about anesthesia.

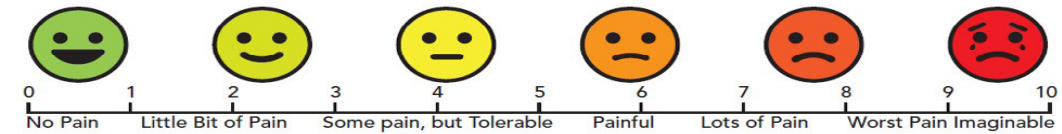
### After Surgery

After surgery, you will go to the recovery room (PACU). Your doctor will update your family or coach to let them know about your surgery.

- You may have oxygen delivered through a tube in your nose or a mask.
- You will have a sling to limit the motion of your arm.
- You may have a nerve block in place to help your pain.
- The nurses will check on you frequently and ask you about your pain.
- You will stay in the recovery room until you are ready for discharge. Some patients may be scheduled to stay one night in the hospital.

## Managing Your Pain After Surgery

It is important to have realistic expectations of your pain after surgery. It is normal to experience discomfort or pain as you are healing. The goal should be to reduce your pain to a level where you are able to safely do your activities. Your healthcare team will ask you about your pain and offer options to decrease your pain.



### Methods Used to Manage Pain

#### • Pain Medicines

- The two types are non-opiates and opiates. Often you will be prescribed a combination of opiates and non-opiates after surgery.

#### • Nerve Block

- Your surgeon and the anesthesiologist will decide if this is a good option for you.
- This will be discussed with you in the pre-op area.
- **Ice** may be used 20-30 minutes every hour you are awake. Ice helps with pain and swelling. This could be a cooling unit, ice in plastic storage bags, gel/clay packs or frozen peas/corn. Some directions for using ice:
  - Apply ice after activity to help reduce pain.
  - Wrap the ice pack in a clean towel or pillowcase. Never put ice directly on your skin.

- **Music:** Helps reduce the strength of pain and helps with muscle relaxation. You may listen, sing, play an instrument or write music.

- **Relaxation, Meditation & Controlled Breathing:** Slow deep breathing helps your body to relax.

- **Position or Activity Change:** Sit, stand, walk. Change your position or move often.

- **Massage:** You may gently rub or massage other areas of your body will help your muscles and soft tissue to relax. Do not massage the surgical site.

- **TV/Movies/Games/Computer:** This will engage your brain and help to distract you from the pain. It is also fun.