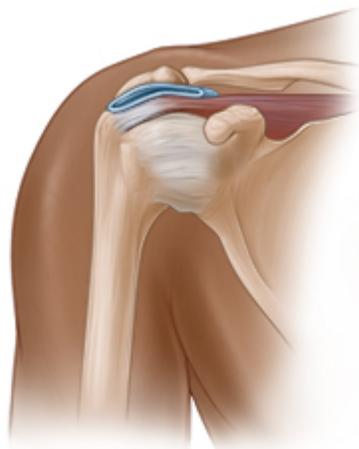


Arthroscopic Surgery for Shoulder Instability: What to Expect at Home



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Your Recovery

Arthroscopy is a way to find problems and do surgery inside a joint without making a large cut (incision). Your doctor put a lighted tube with a tiny camera—called an arthroscope, or scope—and surgical tools through small incisions in your shoulder.

You will feel tired for several days. Your shoulder will be swollen. And you may notice that your skin is a different color near the cuts the doctor made (incisions). Your hand and arm may also be swollen. This is normal and will go away in a few days. Depending on the medicine you had during the surgery, your entire arm may feel numb or like you can't move it. This goes away in 12 to 24 hours.

You will have sutures (stitches) and a bandage on your shoulder. You may be able to take off the bandage in about 3 days, or when your doctor tells you. Your arm will also be in a sling for at least 1 week and maybe as long as 6 weeks. You may take the sling off when you dress or wash and during rehabilitation (rehab). If the sutures are not the type that dissolve, your doctor will take them out 7 to 10 days after your surgery.

You will need rehab. This will probably start 1 to 2 weeks after your surgery and last for 4 to 6 months.

You may be able to do easier daily activities in 2 to 3 weeks. Most people who work at desk jobs can go back to work at this time. If you lift, push, or pull at work, you will probably need 3 to 4 months off.

Most people can start activities with low risk of shoulder injury in about 3 months. This includes jogging and lifting light weights. If you play sports, then training may also start at this time. Most baseball or softball players can start a program to toss a ball lightly. It may take 6 to 12 months to return to normal throwing. How long it takes depends on how damaged your shoulder was and how well your rehab goes.

This care sheet gives you a general idea about how long it will take for you to recover. But each person recovers at a different pace. Follow the steps below to get better as quickly as possible.

How can you care for yourself at home?



Activity

- Rest when you feel tired. Getting enough sleep will help you recover. You may be more comfortable if you sleep in a reclining chair. To make your arm and shoulder feel better, keep a thin pillow under the back of your arm while you are lying down.
- Try to walk each day. Start by walking a little more than you did the day before. Bit by bit, increase the amount you walk. Walking boosts blood flow and helps prevent pneumonia and constipation.
- For 2 to 3 weeks, avoid lifting anything heavier than a plate or a glass with your affected arm.
- Wait until your shoulder is completely healed and your doctor says it is okay before you do activities that stress your shoulder. These include chopping wood, playing contact sports like football or sports with risk of falls, lifting heavy weights, and doing overhead work such as painting a ceiling.
- Ask your doctor when you can drive again.
- You may shower after your bandage is removed. Do not take a bath until the incisions are healed. This is about 2 to 3 weeks after surgery. Remove the sling and keep your arm at your side while you shower.
- Most people who work at desk jobs can return to work in 2 to 3 weeks. If you lift, push, or pull at work, you will probably need 3 to 4 months to recover.



Diet

- You can eat your normal diet. If your stomach is upset, try bland, low-fat foods like plain rice, broiled chicken, toast, and yogurt.
- Drink plenty of fluids, unless your doctor tells you not to.
- You may notice that your bowel movements are not regular right after your surgery. This is common. Try to avoid constipation and straining with bowel movements. You may want to take a fiber supplement every day. If you have not had a bowel movement after a couple of days, ask your doctor about taking a mild laxative.



Medicines

- Your doctor will tell you if and when you can restart your medicines. He or she will also give you instructions about taking any new medicines.
- If you take aspirin or some other blood thinner, ask your doctor if and when to start taking it again. Make sure that you understand exactly what your doctor wants you to do.
- Take pain medicines exactly as directed.
 - If the doctor gave you a prescription medicine for pain, take it as prescribed.
 - If you are not taking a prescription pain medicine, ask your doctor if you can take an over-the-counter medicine.

- If you think your pain medicine is making you sick to your stomach:
 - Take your medicine after meals (unless your doctor has told you not to).
 - Ask your doctor for a different pain medicine.
- If your doctor prescribed antibiotics, take them as directed. Do not stop taking them just because you feel better. You need to take the full course of antibiotics.



Incision care

- If you have a dressing over your incision, keep it clean and dry. Your doctor will let you know when to remove it.
- If your incision is open to the air, keep the area clean and dry.
- If you have strips of tape on the incision, leave the tape on for a week or until it falls off.



Exercise

- You will need rehabilitation. This is a series of exercises you do after your surgery. Rehab helps you get back your shoulder's range of motion and strength. You will work with your doctor and physical therapist to plan this exercise program. To get the best results, you need to do the exercises correctly and as often and as long as your doctor tells you.



Ice

- You may have a machine that ices your shoulder. If you do not, put ice or a cold pack on your shoulder for 10 to 20 minutes at a time. Try to do this every 1 to 2 hours for the next 3 days (when you are awake) or until the swelling goes down. Put a thin cloth between the ice and your skin.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

When should you call for help?



Call 911 anytime you think you may need emergency care. For example, call if:

- You passed out (lost consciousness).
- You have chest pain, are short of breath, or you cough up blood.

Call your doctor now or seek immediate medical care if:

- You have pain that does not get better after you take pain medicine.

- Your hand is cool or pale or changes color.
- Your cast or splint feels too tight.
- You have tingling, weakness, or numbness in your hand or fingers.
- You are sick to your stomach or cannot drink fluids.
- You have loose stitches, or your incision comes open.
- You have signs of a blood clot in your leg (called a deep vein thrombosis), such as:
 - Pain in your calf, back of the knee, thigh, or groin.
 - Redness or swelling in your leg.
- You have signs of infection, such as:
 - Increased pain, swelling, warmth, or redness.
 - Red streaks leading from the incision.
 - Pus draining from the incision.
 - A fever.
- You bleed through your bandage.

Watch closely for changes in your health, and be sure to contact your doctor if:

- You have a problem with your cast or splint.
- You do not get better as expected.

Where can you learn more?

Go to <https://www.healthwise.net/patiented>

Enter **G396** in the search box to learn more about "**Arthroscopic Surgery for Shoulder Instability: What to Expect at Home**".

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