

MY GUIDE To Shoulder Replacement Surgery and Recovery



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Please bring this booklet with you to all appointments and on the day of surgery

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IMPORTANT CONTACTS

Area/Location	Phone Number:
My Surgeon's Office	-
Pre-Admission Clinic	905-845-2571 ext. 4497
Prehab Education Class <i>Email: Prehab@haltonhealthcare.com</i>	905-845-2571 ext. 5638
Bundled Care Integrated Care Coordinator	905-845-2571 ext. 5717
24/7 Help Line - St. Elizabeth Home Care	1-866-898-2480
Fracture Clinic	905-845-2571 ext. 3193
Outpatient Physiotherapy Clinic	—

Important Details

Area/Location	Phone Number:
My Care Partner	Name: Relationship:
Discharge Location <i>(ex. home, staying with friend/family, respite care)</i>	
Transportation Plans <i>(ex. to/from hospital - to/from appointments)</i>	Name:
Prehab Education Class <i>https://haltonhealthcare.com/prehab</i>	Date: Instructor:
Pre-Admission Clinic Appointment	Date:
Surgery Day	Date:
Fracture Clinic Appointment	Date: Location:
Outpatient Physiotherapy Appointment (First Appointment 4 Weeks Post Surgery)	Date: Location:

MY SHOULDER REPLACEMENT JOURNEY

Your Health Care: Be Involved

You and your surgeon have decided to proceed with shoulder replacement surgery. You have now taken the first step toward returning to your daily routine and an improved quality of life.

This guide outlines the important information you need to achieve the best results from your shoulder replacement surgery. This booklet will provide you with general, helpful information regarding what you may experience before and after surgery.

This guide is your workbook: **please bring this booklet to all appointments on your journey.**

This Workbook Discusses

- How to prepare for your upcoming surgery.
- What to expect before, during and after surgery and during your hospital stay.
- What to expect and what to do to continue your successful recovery at home.

Our goal is to help you get back to your home and community as soon as possible after your surgery. To achieve the best results from your surgery, it is very important that you actively participate and prepare in order to optimize your recovery.

Why Do I Need Surgery

The primary reason for needing shoulder replacement surgery is to relieve the pain in the shoulder caused by damage to the joint. This occurs from wear and tear on the shoulder joint or from the disease process called **Arthritis**. The normal cartilage which protects the shoulder becomes damaged and causes pain, swelling and stiffness in the joint.

❖ What Does My Shoulder Look Like?

The shoulder joint is a ball and socket joint.

It is made up of two large bones:

- A ball at the end of the upper arm bone (humerus)
- A socket on the shoulder blade (glenoid on the scapula)



Articular cartilage (a smooth, elastic type tissue) covers the surfaces of these bones to protect them and allow for smooth movement.

Ligaments (strong rope like structures) connect the humerus to the scapula. Stability is added to the joint by a thickened tissue called the capsule.

Rotator Cuff Muscles are a group of muscles and tendons that surround the joint to help support it and enable movement. The condition of your rotator cuff is important in determining what type of shoulder replacement you have and the outcome.

MY SHOULDER REPLACEMENT JOURNEY

❖ What is Osteoarthritis?

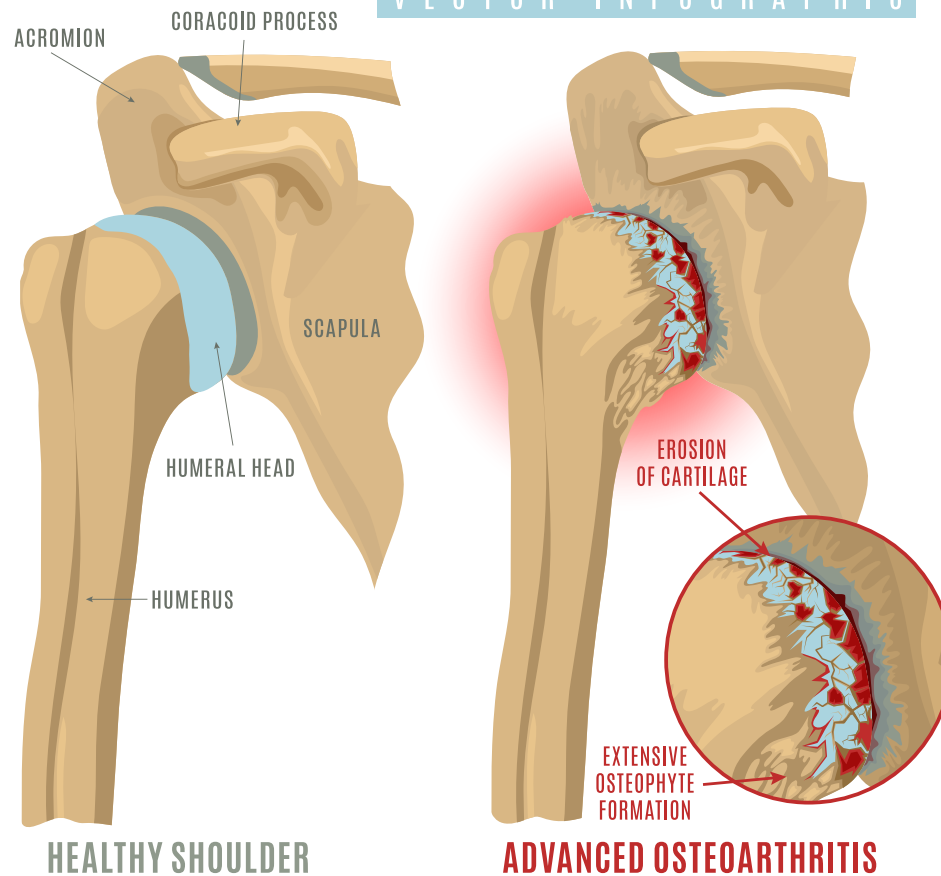
Osteoarthritis is the most common “wear and tear” form of arthritis. It is a disease of the joint that results from wearing of the protective cartilage that cushions our bones.

This can result from:

- Increased BMI/obesity
- Previous injury to your shoulder
- Joint mal-alignment/abnormal joint shape
- Heavy or repetitive use of your shoulder over a prolonged period of time
- Age/gender
- Genetics

SHOULDER OSTEOARTHRITIS

VECTOR INFOGRAPHIC



❖ What is a Shoulder Replacement?

During surgery, the surgeon will remove the damaged cartilage and bone of your shoulder and replace it with an implant. The implant is made up of two components:

- A metal socket lined with a strong plastic liner (to replace your *glenoid fossa*)
- A metal ball and step (to replace your *humeral head*)

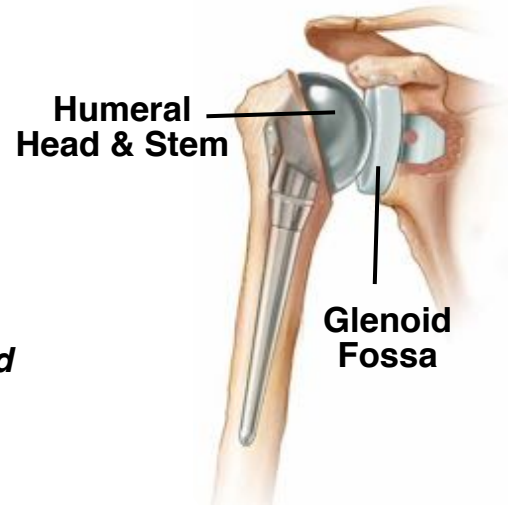
MY SHOULDER REPLACEMENT JOURNEY

Types of Shoulder Replacements

1. Anatomic (Standard) Total Shoulder Replacement

The surgeon will remove the damaged cartilage and bone of your glenoid fossa and humerus and replace it with an implant. The implant is made up of two components.

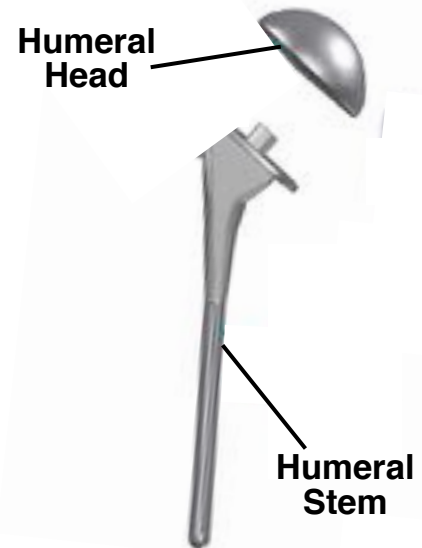
- A plastic shell - replacing the ***glenoid fossa***
- A metal ball and stem - replacing the ***humeral head***



2. Hemi-Shoulder Replacement

The surgeon replaces only the ***humeral head*** of the shoulder.

The shoulder blade (***glenoid fossa***) remains in its natural state.

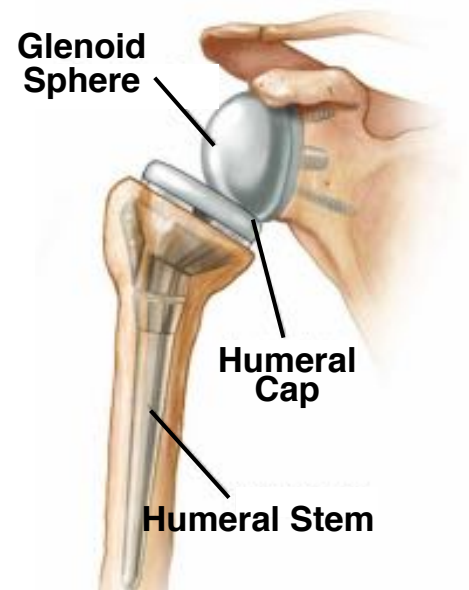


3. Reverse Total Shoulder Replacement

Performed if there is severe damage to the shoulder or if rotator cuff muscles are unable to stabilize the shoulder joint.

The surgeon will remove the damaged parts of the shoulder and replace with implants. The implant is made up of two components:

- A metal sphere - to replace your ***glenoid fossa***
- A metal stem with a plastic spacer - replacing ***humeral head***



MY SHOULDER REPLACEMENT JOURNEY

My Journey

You will be required to attend appointments prior to your surgery. All appointments/classes are mandatory to ensure a successful journey.

1. Prehab Education Class

You are expected to attend the Prehab Education Class prior to your surgery. The educational session is specific to patients undergoing anatomic total shoulder arthroplasty, hemi-shoulder arthroplasty or reverse shoulder arthroplasty. The class is given in small groups and is instructed by a physiotherapist. Depending on what is available, you may participate in the class virtually or in person. The class will cover all topics related to your upcoming surgery including what to expect post-operatively, how to best prepare your home and what arrangements you will need to make to ensure your return home from the hospital is a safe one. This is a great place to get any of your questions answered and learn tips for a successful recovery. You will receive a call from the Prehab Team (approx. 4 weeks) prior to your surgery to arrange your appointment. If you do not receive a call you can reach Prehab at:

905-845-2571 ext 5638 (Email: Prehab@haltonhealthcare.com)

- Have a friend or family member attend the education class with you.
- Ensure you have a discharge plan that includes family/friend supervision/assistance for 6-12 weeks after surgery.
- Plan to have someone help you with groceries, meals, laundry, pet care and housekeeping for at least 6-12 weeks after surgery.
- Organize transportation to and from your upcoming appointments - (ParaTransit, family/friend).
- You may require adaptive equipment after surgery. A vendor list will be provided.
- Discharge for patients who are admitted after surgery is typically the morning after surgery. Day surgery patients, should expect to be discharged from hospital in the afternoon.

***Please note that the hospital does not provide transportation services.**

You will need to arrange for someone, either a family member or friend, to stay with you for 6 weeks after discharge from the hospital or until you feel safe to be on your own.



MY SHOULDER REPLACEMENT JOURNEY

2. Pre-Admission Clinic Appointment

Approximately 2-3 weeks before surgery, you will also have an appointment at the Pre-Admission Clinic where you will meet with a nurse and an anesthetist. You may also require pre-operative testing. The appointment is approximately 2-3 hours in length so you may wish to bring something to eat and drink. Please ensure to bring the following items to your appointment:

- Your Ontario Hospital Insurance Plan (OHIP) card and photo identification
- Ensure that your family doctor has filled out and provided a CPP (**C**umulative **P**atient **P**rofile). This can be either faxed to the Pre-Admission Clinic at 905.338.4496 or fax it to your surgeon's office.

If this is not completed prior to the Pre-Admission Clinic appointment, the anesthetist consult may be rescheduled to another appointment.

- Your envelope that includes all the documents given to you at your surgeon's office, any test results (if done outside the hospital) and additional notes/forms from physician assessment visits.
 - ▶ **Remember to complete all documents or forms included in your envelope**
- A detailed list of all of your medications in addition to all medications, vitamins, herbals/ supplements in their original bottles. You will also be asked to provide information regarding use of any other substances such as alcohol or street drugs.
- Your **Care Partner** (family member or friend) is encouraged to come with you
- Ensure you are aware of what to expect on the night before surgery and day of surgery before leaving this appointment.

3. Surgery

- ▶ **NOTE:** The following checklist applies to **all patients** who are scheduled for a total shoulder replacement including those scheduled for day surgery (in the event of an unexpected overnight stay).

It is **necessary that you arrive 2 - 3 hours BEFORE your surgery** to provide the surgical team with adequate time to complete your surgical preparation. Please ensure you bring:

- Your OHIP card and photo ID
- "My Guide to Total Shoulder Replacement Surgery" booklet
- A written list of current medications
- Toiletries (*toothbrush, toothpaste, deodorant, soap, shaving kit, etc.*)
- Appropriate clothing (*loose fitting, soft, easy to slip on and off, button/zip up shirt*)
- Appropriate footwear (*sneakers or slippers that enclose the whole foot/slip-on*)
- Glasses, hearing aids, dentures - bring containers to store them in.

MY SHOULDER REPLACEMENT JOURNEY

3. Surgery Cont'd

Additional Items you may require:

- CPAP machine - if you have sleep apnea
- Your cooling unit (ice machine)
- Gait Aid (cane or walker if normally used)
- Please do not bring any personal items of sentiment or value.**

4. In-Patient Stay

During your admission you will have many people making up your healthcare team. They will help you get prepared for discharge home. Mobility starts the day of your surgery and the team will assist you by:

- ▶ Working with you to keep your pain under control.
- ▶ Complete dressing changes, if needed and ensure a stable healing wound
- ▶ Understand your shoulder precautions
- ▶ Review your home exercise program that you will complete up to 4 weeks post-surgery until your outpatient physiotherapy program begins.

Expect a length of stay up to 24 hours. If you are staying overnight, your discharge from the hospital can be as early as 10:00am. Please confirm time with the hospital staff. The Bundled Care Integrated Care Coordinator will ensure follow-up services are in place, if appropriate. If you require further information contact: **905-845-2571 ext 5717.**

5. Outpatient Physiotherapy Appointment

You will be asked at Prehab Education Class where you plan to attend outpatient physiotherapy. For successful recovery, your first outpatient physiotherapy appointment should be scheduled to begin 4 weeks after surgery to continue your shoulder rehabilitation. **You must have this appointment booked prior to surgery.** Halton Healthcare has publicly funded options at Work-Fit Total Therapy **(905-845-9540)** locations in Oakville, Milton and Georgetown Hospitals. You may also attend a private physiotherapy clinic, however, these clinics are not publicly funded and you will be responsible for reimbursing the clinic for their services.

For a list of publicly funded clinics in your area, please visit:

http://www.health.gov.on.ca/en/public/programs/physio/pub_clinics.aspx

6. Fracture Clinic Appointment

The follow up appointment with your surgeon will be scheduled approximately **14 days** after surgery in the fracture clinic. Ensure you take this time to ask any questions regarding your recovery.

PREPARING FOR SURGERY

Managing Pain

If you are seeing a physiotherapist prior to surgery, prescription of exercises would be up to the treating physiotherapist's discretion. Your physiotherapist can also educate you on other pain management techniques such as the use of heat or ice.

Physical Activity/Exercise

The majority of individuals living with shoulder osteoarthritis experience pain and reduced mobility. However, exercising within your limits to improve your overall fitness helps with post-operative outcomes.

- ▶ Start an exercise routine as early as possible. It is important to improve your overall strength and cardiovascular fitness.
- ▶ Your preparation prior to surgery is vital to the successful rehabilitation of your new shoulder and directly affects post-operative outcomes.
- ▶ ***Speak with your physiotherapist about pre-operative exercise.***

General Health

Prior to surgery, it is important that your health be stable and that chronic medical conditions are well controlled.

- ▶ This includes dental care, consider getting any needed cleanings prior to surgery.
- ▶ If you have an infection around the time of surgery, it may delay your shoulder replacement.



PREPARING FOR SURGERY

Nutrition

To prepare for surgery it is recommended that you continue to eat a healthy, balanced diet. Good nutrition can assist in recovery from surgery and also helps reduce the risk of infection. Please speak with your doctor, pharmacist or dietitian if you have any questions or concerns about dietary requirements.

- ▶ Drink plenty of fluids and stay hydrated (8 glasses a day).
- ▶ Include fiber in your diet to help avoid constipation. Foods high in fiber include beans, leafy green vegetables, raisins, prunes, whole wheat pasta and breads.
- ▶ Make sure you are getting enough Vitamin D, Vitamin C, iron and calcium through whole, healthy foods and speak to your doctor or pharmacist if you have any questions regarding additional supplementation.



Constipation is a common side effect of anesthesia and pain medication. Eat light meals, drink plenty of fluid and consume a diet rich in fiber.

Smoking

We recommend that you stop smoking before surgery and stay off cigarettes until at least one week after surgery, preferably 6-12 weeks. If you stop smoking, you will improve your healing process and prevent infection after surgery, as well as improve your overall heart health and lung function. Nicotine taken by any route specifically can slow bone and tendon healing and lead to a poor result after surgery.

If you have thought about quitting for good, there is no better time than now, especially because you are having surgery. Ask your healthcare team about how they can help you deal with the withdrawal symptoms while in hospital. They can also assist in providing you with stop-smoking interventions, including community resources.

Our hospital is a **Smoke Free Facility**. This also means that smoking or vaping is prohibited on all hospital grounds.

Alcohol

We recommend that you eliminate or minimize alcohol use before surgery. Alcohol consumption can cause complications during and after surgery. **It is important that you inform your doctor and admission nurse if you drink alcohol on a regular basis.**

PREPARING YOUR HOME ENVIRONMENT/HOME SAFETY PREPARATION

Before surgery, consider making some changes in your home for easier management.

- Make sure there is proper lighting indoors and outdoors, especially around stairs, and consider using a nightlight for your pathway to the bathroom.
- Safe entry & exit to your home
 - ▶ Make sure railings are secured. If there are no railings in your home, you may wish to install at least one.
- Move obstacles – such as throw rugs, extension cords, and footstools – out of your walkway. Create a wide, clear path from your bedroom to your bathroom and kitchen so you can easily move about.
 - ▶ Remove small rugs and tape down the edges of larger rugs.
- If you have trouble getting off furniture surfaces, such as a bed, chair and toilet before your surgery, speak to your therapist at your Prehab education class about furniture modifications or adaptive equipment that you may require.
 - ▶ Low furniture, soft surfaces, footstools, swivel chairs, rocking chairs and chairs with wheels (e.g. office chairs) **must be avoided**.
- Place commonly used items within safe reach, such as on the counter top. Safe reach is between your shoulder and waist height. High shelves and drawers, such as those found in the refrigerator cannot be accessed during your recovery period.
 - ▶ Use counter height toaster ovens and microwave ovens for easier cooking.
 - ▶ Avoid using the regular oven.
- If you have pets, make arrangements to keep pets in another area of the house when you arrive home.
- If having surgery on your dominant shoulder, practice using your non dominant hand for everyday activities in order to help you prepare.

Care Partner/Respite Care

Following surgery, you will require a responsible caregiver (your **Care Partner**) to take you home from the hospital and stay with you. If you live alone, plan to have someone stay with you for 6 weeks after surgery.

Consider the following options for a safe discharge home:

- Have someone stay with you (your **Care Partner**)
- Temporarily move into a family member or friend's home
- Access a retirement home for a short respite stay

If you choose respite care, retirement homes offer professional supervision that is not covered by OHIP or most private medical insurances. You are responsible to pay for the cost of respite care.

Please contact your retirement home of choice as soon as possible to ensure a reservation for the day after your surgery, as some respite homes require 2-3 months' notice.

*Please refer to **APPENDIX B** for a list of respite care options for consideration.*

PREPARING YOUR HOME ENVIRONMENT/ HOME SAFETY PREPARATION

Adaptive Equipment

Speak with the Physiotherapist at Prehab to discuss if you may require any of the listed equipment below.

If suggested, please arrange for the adaptive equipment below to be appropriately set up in your home **before coming in for your surgery**. You will be provided with a vendor list at the Prehab education class. Use this list to investigate suppliers in your area and inquire about prices. Check with your insurance company with regards to financial coverage/reimbursement for medical equipment.

Below is a list of adaptive equipment that MAY be suggested to make your life easier and keep you safe

Optional Adaptive Equipment
<input type="checkbox"/> Raised Toilet Seat (without hand rail on surgical side)
<input type="checkbox"/> Tub Transfer Bench/Shower Chair
<input type="checkbox"/> Cooling Unit / Ice Packs
<input type="checkbox"/> Hand Held Shower
<input type="checkbox"/> Shower Chair for Walk In Showers
<input type="checkbox"/> Non Slip Mat
<input type="checkbox"/> Long Handled Sponge
<input type="checkbox"/> Reacher

Private Home Services - Fee For Service

If you require assistance to manage at home after surgery, please consider organizing private home services.

Refer to **Appendix A** for a list of private home service agencies in the area. If you require further information, or home services outside of the local catchment area, contact the Bundled Care Integrated Care Coordinator - **905-845-2571 Ext. 5717**.

Ice:

Icing can be useful in helping with pain control, swelling and your ability to participate in physiotherapy in the days after your surgery. Some patients when icing regularly, take less pain medicine. We suggest using ice packs for ~ 20 min after exercise. Talk to your physiotherapist or surgeon if you have questions about the use of ice.



Your outpatient physiotherapist can also help with pain management.

PREPARING YOUR HOME ENVIRONMENT/ HOME SAFETY PREPARATION

After your shoulder replacement the surgical arm will be in a sling for 6 weeks. As a result you will be unable to complete many functional tasks independently. Family and friends often want to help but are not sure how. Try sharing this list with them and decide together how they can help.

Housework and Yard Work	
<input type="checkbox"/> Running errands or driving you to appointments.	<input type="checkbox"/> Encouraging/helping with your exercises.
<input type="checkbox"/> Grocery shopping and lifting/carrying other heavy items.	<input type="checkbox"/> Helping with personal care (e.g. showering)
<input type="checkbox"/> Vacuuming, dusting, making/changing beds, laundry, cleaning the bathroom etc.	<input type="checkbox"/> Picking up newspapers and flyers left outside the door.
<input type="checkbox"/> Meal preparation and clean-up.	<input type="checkbox"/> Prepare and freeze meals for yourself to last 6 weeks after your surgery. Single serving portion sizes are easier to manage.
<input type="checkbox"/> Taking out the garbage.	<input type="checkbox"/> Stock up on easy-to-prepare foods or pre-packaged frozen meals.
<input type="checkbox"/> Lawn/garden care or removing snow.	<input type="checkbox"/> Meals can also be purchased at a cost. See Appendix A for options of private home services which may be of help.

Transportation (The hospital does not provide transportation)

You will not be able to drive for 8 -10 weeks after your surgery. **DO NOT RETURN TO DRIVING UNTIL CLEARED BY YOUR SURGEON.** It is your responsibility to plan your transportation to and from surgery and all appointments.



If you plan to use accessible community transportation, please note that applications for these transportation services must be filled out prior to your Prehab class. **Note:** application forms must be signed by a health care provider, e.g. (Family Physician or Prehab Instructor).



Local transportation applications can take up to 4 weeks, please ensure timely completion of your application. See Appendix C for a list of services and phone numbers.

Temporary accessible parking permits are available if you are having significant difficulty managing to get to a destination after parking your car. You can apply for one in-person at any Service Ontario location or by mail. Please visit <https://www.ontario.ca/page/get-accessible-parking-permit> to access the application form and for more information. The form must be certified by a regulated health professional such as a physician, physiotherapist or occupational therapist. If you have any questions, do not hesitate to ask your Prehab Instructor.

MY IN HOSPITAL STAY

Surgery

When you arrive in Surgical Day Care (2nd floor off Centre elevator – surgical services “G”) you will be asked to change into a gown and you will be brought to the pre-operative area. In the pre-operative area, the nurses may start an IV in your arm, provide you with any pre-operative medications, and ensure you are prepared for surgery.

You will also be seen by the anesthetist and your surgeon prior to your surgery.

If there are any changes to your surgery time the nurses will notify you. Then the operating room nurse will walk you to the operating room or a room where a nerve block can be placed prior to surgery. **Your surgery may last up to 2 hours.**

Prior to surgery you may be given a **nerve block** (an injection in the neck area that provides freezing to the shoulder and arm that typically lasts 8-24 hours). **You may be unable to feel or move your arm and hand for the duration of the block.** During this time it is important to wear your sling to protect your arm.

Before the surgery the anesthetist will review this process and answer any questions you may have regarding the nerve block.

After surgery you will go to the recovery room where nursing will reassess your medical status. They will also assist with managing your pain and/or nausea.

Same Day Surgery

If you are scheduled to go home the same day you will stay in the recovery room until your pain is well managed. You will then be transferred to Surgical Day Care. The nurse will check your incision, manage pain, temperature, blood pressure and oxygen level. You should expect to be discharged in the afternoon.

Overnight Stay

From the recovery room you will be taken to the surgical floor where you will stay until you are discharged.

On the surgical floor the nurse will check your incision, manage pain, temperature, blood pressure and oxygen level.

You and your family are encouraged to ask your healthcare team any questions if you are anxious or unsure about anything.

You should expect to be discharged the morning after your surgery.

Note: You surgical arm may still be numb from the nerve block when you go home from the hospital. These nerve blocks can last from 8-24 hours. Please follow surgeons instructions on taking your pain medication.

MY IN HOSPITAL STAY

Pain Management and Medication Schedule

Following surgery, it is important that you discuss any issues you are having managing your pain with members of your healthcare team. You may be asked what your pain is on a scale of **0 – 10** (**0** = no pain, **10** = the worst pain ever experienced). Goal is to be at **4** or less.

When your pain is dealt with effectively, your function and recovery will be optimized. Always inform your nurse when pain medication is required. You may wish to time your exercises when your pain medication is most effective.

Shoulder Precautions

You are encouraged to maintain a healthy and active lifestyle during and after your recovery. This includes walking and completing exercises daily as prescribed by your physiotherapist to further improve strength and function.

- Wear your sling at all times for 6 weeks after surgery. This does include keeping your sling on while you are sleeping
- Remove sling only when completing exercises and/or personal hygiene
- Avoid shoulder external rotation - rotating your forearm away from the abdomen
- DO NOT** push, pull or lift more than a cup of coffee with your surgical arm for at least 6 weeks after surgery
- DO NOT** allow someone to pull on your surgical arm
- DO NOT** push up from chair using your surgical arm

Incision Care

Nursing staff will assess your incision before you go home and may provide you with material for a home dressing change. Please remember to ask any questions if you are unclear how to change it.

Your dressing can remain in place for up to 2 weeks after surgery until your follow up with your surgeon. If your dressing is wet or leaking and you are concerned, please change your dressing and contact your **Surgeon** or the **Shoulder Replacement St. Elizabeth 24/7 Helpline at 1-866-898-2480**.

Do not apply any ointments, lotions or creams to your incision. An ideal time to change your dressing is after a shower as the water and soap from your shower will clean your incision. Swelling and warmth around the incision are common after a shoulder replacement. A small amount of discharge, clear or bloody is also fine and should diminish in the days after surgery.

MY POST-OPERATIVE CARE

Exercises Following Your Total Shoulder Joint Replacement

The early stages of your rehabilitation include performing the exercises prescribed below. At 4 weeks, you will have a follow up with your outpatient physiotherapist who will progress your exercises based on your healing and recovery.

DO NOT START ANY OTHER EXERCISES WITHOUT APPROVAL FROM YOUR PHYSIOTHERAPIST.

Pre And Post-Operative Exercises Weeks 0 - 4 (#1 - 10)

*Exercises should begin as soon as your nerve block wears off.
It is normal to have some discomfort while doing exercises.*

1.

Ankle Pumps & Circles

May be completed in lying or sitting position.

- **Reps:** 10x/Side

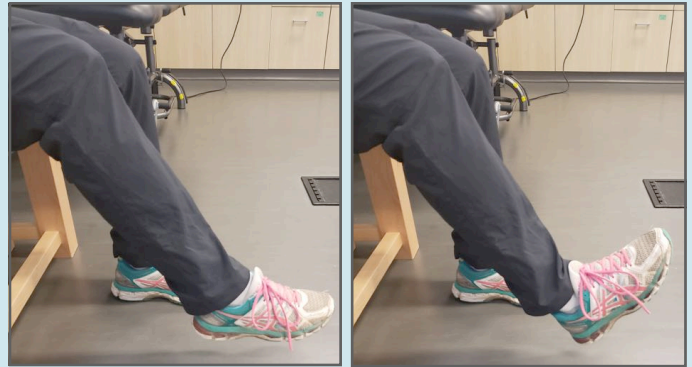
Frequency: Hourly when awake

Preparation:

- Find a comfortable position

Execution:

- Point and flex your feet



2.

Deep Breathing

- **Reps** 5-10x | **Hold:** 5 Seconds | **Frequency:** Hourly when awake

Preparation:

- Find a comfortable position in sitting
- Place your hands on your lower ribcage

Execution:

- Take a deep breath through your nose. Feel your lower ribcage expand in your hands. Hold for 3 seconds and exhale as if you were blowing out candles.



MY POST-OPERATIVE CARE

3.

Neck Exercises

- Reps: 3x/Side | Frequency: 3x/day

Preparation:

- Sit in a comfortable position
- Gently pull your shoulders down and back, placing your neck in a neutral position

Execution:

- Gently turn your head from side to side (looking left and right)
- Gently tilt head ear to shoulder and back to neutral position.

Note: stop exercise if you feel dizzy or lightheaded.



4.

Finger Bending and Straightening

- Reps: 10x | Frequency: 3x/day

Preparation:

- Find a comfortable position in sitting or lying
- Remove your sling
- Ensure elbow on operated side is close to your body

Execution:

- Gently open and close your fist, making as full a fist as normal for you and fully straighten fingers each time.



5.

Wrist Flexion/Extension

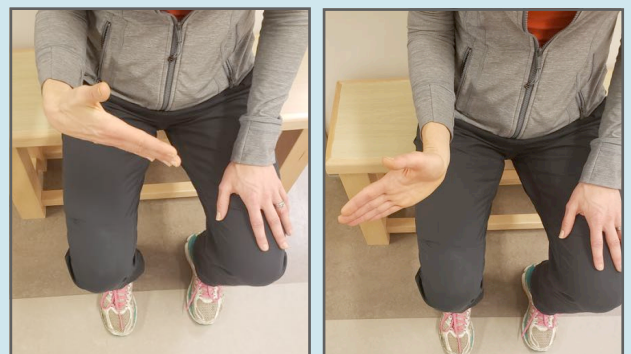
- Reps: 10x | Hold: 5 seconds | Frequency: 3x/day

Preparation:

- Get into a comfortable position. You may or may not have your sling on.

Execution:

- Keeping your elbow close to your body gently move your wrist side to side.



MY POST-OPERATIVE CARE

6.

Ulnar/Radial Deviation

- Reps: 10x | Hold: 3-5 Seconds Frequency: 3x/day

Preparation:

- Get into a comfortable position in sitting. Remove your sling.
- Ensure you keep elbow close to your body on operated side.

Execution:

- Move your wrist from side to side.



7.

Pronation/Supination

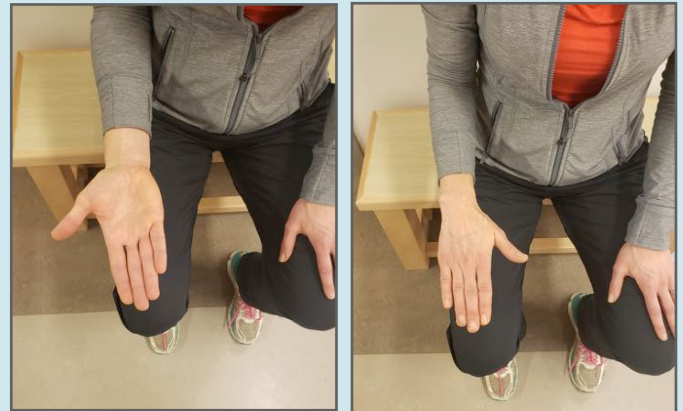
- Reps: 10x | Hold 3-5 Seconds Frequency: 3x/day

Preparation:

- Get into a comfortable position in sitting. Remove your sling.
- Ensure you keep elbow close to your body on operated side.

Execution:

- Slowly turn your palm up and down.



8.

Elbow Flexion/Extension

- Reps: 10x | Hold: 3-5 seconds | Frequency: 3x/day

Preparation:

- In lying or sitting, position yourself in a comfortable position
- Release your arm from your sling
- Ensure you keep elbow on operated side close to your body

Execution:

- Gently allow your forearm to relax as you straighten your elbow
 - Hold for 3-5 seconds
- Reverse this movement bending your elbow as far as is comfortable
 - Hold for 3-5 seconds



MY POST-OPERATIVE CARE

9.

☐ Shoulder Active Assist Flexion to 90°

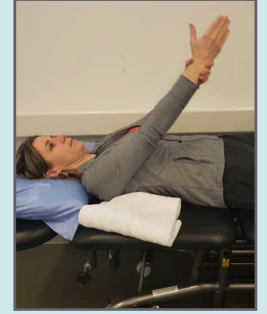
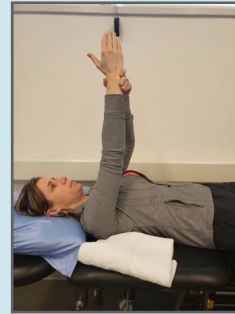
- Reps: 10x | Hold 3-5 seconds | Frequency: 3x/day

Preparation:

- Position yourself in a comfortable position lying on your back.
- You may place a small folded towel under your surgical arm for support.

Execution:

- Using your non-surgical arm, gently lift your surgical arm forward with the goal of reaching 90°.
- Hold for 3-5 seconds at the top of your lift, gently returning your arm to resting position.



10.

☐ Pendulum

- Reps: 10x | Frequency: 3x/day

Preparation:

- In standing: position yourself beside a strong steady surface (on your non surgical side) that can support your body weight such as a countertop or heavy piece of furniture.

Execution:

- Bend forward at your waist and let operated arm hang from your body.
- Gently shift your weight using your legs allowing arm to swing like a pendulum from front to back and in circles both directions.



Please refer to our Prehab video's for additional information:

www.haltonhealthcare.com/prehab

MANAGING MOVEMENT AFTER SURGERY

Getting Dressed



Your shoulder will be immobilized for 6 weeks after surgery. During this time it is important to maintain your independence as much as possible with dressing.

- Ensure you have appropriate loose fitting clothing available.
 - Large shirts, preferably button down
 - Loose fitting pants
 - Avoid wearing socks or get assistance putting them on
 - Supportive shoes

Putting Your Shirt On and Off

1. Using your hand on your non-surgical side, thread your surgical arm through your sleeve up to your armpit.
2. Feed your non-surgical arm through shirt
3. Using your non-surgical arm pull shirt over head

Sleeping/Positioning

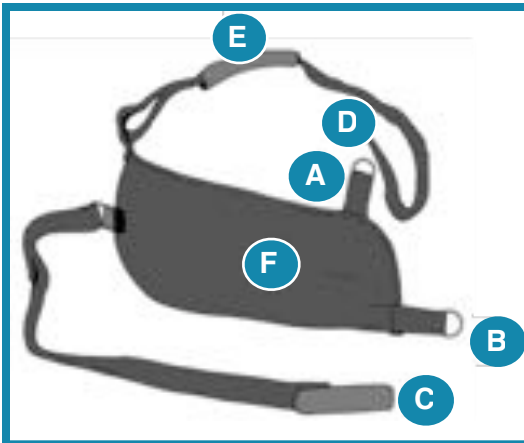
Sleep is an integral part of our daily routine and healing process after surgery. It is common for people who have had a shoulder replacement to have difficulties adjusting to sleep after surgery. Limiting factors such as pain, positioning, and discomfort are common.

The following are recommendations to promote a comfortable sleep

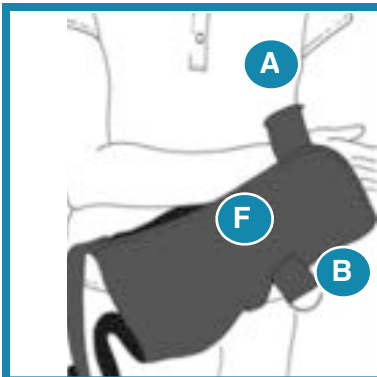
- Sleep in a reclined position** – if you do not have a recliner chair use pillows/wedge on the couch or bed to provide an incline for 4-6 weeks.
- Use a cooling unit/ice machine** – to help decrease pain through the night
- Wear your sling** – this will help you avoid accidentally moving your surgical arm into an uncomfortable or unsafe position when sleeping
- Timing your medication** – ensure you are taking your pain medication as prescribed and plan to take your medication approximately 30 minutes before going to sleep.

MANAGING MOVEMENT AFTER SURGERY

Putting Your Sling On and Off



A Top Ring	B Side Ring
C Waist Strap	D Shoulder Strap
E Neck Pad	F Arm Cover

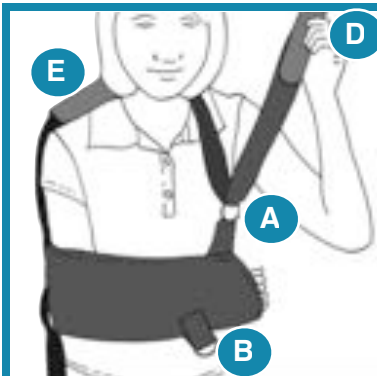


Step 1:

Place your hand on your surgical side into the sling cover **F**

Step 2

Ensure your elbow fits all the way into the corner of the sling.

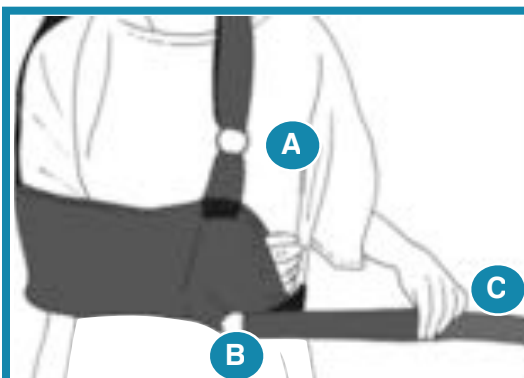


Step 3:

Pull shoulder strap **D** through top ring **A** and secure shoulder strap **D** back onto itself with the Velcro.

Note: Elbow should be resting at 90° angle

Alternative method: You may also bring pre-fastened shoulder strap over your head.



Step 4:

Note: Shoulder strap comes behind the affected shoulder.

Pull waist strap **C** through side ring **B**. Secure back onto itself with the velcro.

MANAGING MOVEMENT AFTER SURGERY

Returning to Driving

You will need to consult with your surgeon regarding your return to driving. It may take 6-8 weeks to be cleared for driving. Being cleared to drive will depend on your individual progress.

Do not drive while taking opioid medications. Opioids impair your ability to safely operate a vehicle.

Returning to Work

Allow yourself enough time to heal before you return to work (usually two to three months). Speak with your surgeon to determine a realistic return to work time frame.

Travel

Before you book or plan travel after surgery, you will require clearance from your surgeon.

Potential Complications/Side Effects

Your nurse will teach you how to recognize blood clots, infection, how to prevent constipation and how to care for your dressing/incision. Your nurse will also teach you about your medications.

❖ Incision/Wound Care /Swelling/Blood Clot

Keep your incision clean and dry. After approx. 14 days your staples will be removed at your fracture clinic appointment.

❖ Infection

If discharge from your wound is green, thick, or has an odour and/or you notice more pain and redness, you should follow up with your doctor, promptly, as your wound could be infected.

Clear, watery, pinkish yellow fluid is normal from your wound after surgery.

❖ Constipation

Constipation often happens after surgery because of pain medication and limited activity. Here are some ways to prevent constipation.

- Drink lots of fluid (8 cups a day)
- Include fiber in your diet (bran, beans, raisins, etc.)
- Continue regular activity
- Maintain a regular bowel routine
- Do not overuse laxatives
- You may also be given medication to help prevent constipation.
Remember to tell your nurse when you have a bowel movement.

WHEN AND HOW TO SEE MEDICAL ATTENTION/CARE

Who Do I Contact?

❖ Surgeon

Call your surgeon's office regarding:

- Sudden and extreme shoulder pain
- Changes to your pain medication protocol
- A refill of opioid medication prescription
- Concerns for infection of the incision/shoulder

❖ Call SE Health 24/7 Help Line (1-866-898-2480) or your Family Doctor if you have:

- Fever over 100.4F or 38°C
- Increased redness, swelling or drainage around skin incision
- A foul odour or yellow or green drainage at the incision site
- Sudden increase in bruising around the incision site
- New leg swelling, calf soreness or calf pain
- Any skin rashes, ulcers or infections
- Infection (i.e. tooth abscess, burning on urination, vaginal infection).
Antibiotics may be ordered to prevent the infection from affecting your shoulder.
- Prolonged bleeding from cuts and nosebleeds; increased menstrual flow; black tarry stools and red or dark brown urine
- A refill of opioid medication prescription
- Concerns for infection of the incision/shoulder

❖ Bundled Care Integrated Care Coordinator

You may receive a call between 48-72 hours after your discharge from hospital to check in on your health status and address any questions/concerns you may have related to your recovery. If you require further information call:

905-845-2571 Ext. 5717

The BCICC is available Monday - Friday 8am - 4pm.

❖ Emergency Department

If you are experience any of the following, go immediately to the emergency department:

- New or worsening shortness of breath or difficulty breathing.
- New or worsening pain, tightness, and or pressure in your chest.
- A sudden, severe increase in pain in your new joint.
- Coughing up blood.



Halton
Healthcare

APPENDIX A – PRIVATE HOME CARE SERVICES

In Home Service Providers

Acclaim Health	acclaimhealth.ca	905-827-8800
Bartimaeus (Mental Health/Dementia)	bartimaeus.com	905-634-8903
Bayshore Healthcare	bayshore.ca	905-896-0200 905-844-5588
CBI Home Health Service	cbi.ca/web/home-health	905-507-2273
Closing the Gap	closingthegap.ca	905-306-0202
Home Instead Senior Care	homeinstead.ca	905-639-4357
Home Well Senior's Care	homewellcares.com	905-639-4357
Links 2 Care (Bathing assist only)	links2care.ca	905-844-0252
Milestone Health Care	milestonehealth.com	1-888-509.9394
Nurse Next Door	nursenextdoor.com	905-599-7906
Para-Med Home Health	paramed.com	905-847-1025
Seniors for Seniors	spectrumhealthcare.com	905-276-1140 905-572-6162
SE Health	sehc.com	905-826-0854
St. Joseph's Home Care	stjosephshomecare.ca	905-522-6887
Tender Love Care		905-847-4463

Community Resources

Able Living Recharge Respite Program (referrals through Central Registry)	ableliving.org	905-338-8357
Meals On Wheels	mealsonwheels.ca	905-815-2020
Connect Care Medical Alert Button	connectcaremedicalalert.ca	905-338-4357
Driving Miss Daisy (accompaniment service)	drivingmissdaisy.ca	905-399-6831
Heart To Home Meals	hearttohomemeals.ca	1-800-786-6113
OSCR & Outreach	oscrservices.ca	905-827-4139
Oakville Hospital Footcare & Orthotics Center	oakvillehospitalfootcare.ca	905-618-0162
Supports to Daily Living, Nucleus Independent Living	nucleusonline.ca	905-829-4499

The resources above are not an endorsement by Halton Healthcare of the products and services provided.

APPENDIX B - RESPITE CARE OPTIONS

Retirement Homes

OAKVILLE	Website	Telephone Number
Chartwell of Oakville 180 Oak Park Drive, Oakville L6H 0A6	chartwell.com	905-257-0095
Churchill Place by Revera 345 Church Street, Oakville L6L 7G4	reveraliving.com	905-338-3311
Sunrise Assisted Living 456 Trafalgar Road, Oakville L6J 3H9	sunriseseniorliving.com	905-337-1145
The Kensington by Revera 25 Lakeshore Rd. W. Oakville L6J 6B4	reveraliving.com	905-844-4000
Trafalgar Lodge by Revera 299 Randall Street, Oakville L6J 6B4	reveraliving.com	905-842-8408

Milton	Website	Telephone Number
Birkdale Place 611 Farmstead Drive, Milton L9T 4M3	reveraliving.com	905-636-6300
Martindale Gardens 45 Martin Street, Milton L9T 2R1	siennialiving.ca	905-693-8592

Georgetown	Telephone Number	Telephone Number
Amica at Georgetown 224 Maple Ave., Georgetown, ON L7G 1X2	amica.ca	905-702-1555

Burlington		Telephone Number
Appleby Place 500 Appleby Line, Burlington L7L 5Z6	reveraliving.com	905-333-1611
Chartwell Christopher Terrace 3131 New Street, Burlington L7N 3P8	chartwell.com	905-632-5072
Lakeshore Place 5314 Lakeshore Road, Burlington L7L 6L8	lakeshore-place.com	905-333-0009
Park Avenue Manor 924 Park Ave, W. Burlington L7T 1N7	parkavenuemanor.ca	905-333-3323
Pearl and Pine 390 Pearl Street, Burlington L7R 2M8	pearlandpineretirement.com	905-633-8300
Sunrise Assisted Living 5401 Lakeshore Rd W. Burlington L6L 6S5	sunriseseniorliving.com	905-333-9969
The Williamsburg 1893 Appleby Line, Burlington L7L 0G5	reveraliving.com	905-335-1121

The resources above are not an endorsement by Halton Healthcare of the products and services provided.

APPENDIX C - TRANSPORTATION SERVICES

Transportation Services	Website	Telephone Number
ActiVan in Georgetown	haltonhills.ca	905-702-6435
Care-A-van in Oakville	oakville.ca	905-337-9222
Handi-Van in Burlington	burlingtontransit.ca	905-639-5158
Mobility Access Plus in Milton	miltontransit.ca	905-864-4141
TRANSHELP in Peel Region	peelregion.ca	905-791-1015
WHEELTRANS in Toronto	ttc.ca/wheeltrans	416-393-4111

The Meds-To-Beds Program at OTMH makes it easier for patients or families to receive their medications before leaving the hospital or for optional home delivery.

T: 905.847.3223 - F: 905.825.8677



Meds-to-Beds

• Physiotherapy • Chiropractic Care • Registered Massage Therapy



Oakville Hospital
3001 Hospital Gate, Oakville, ON L6M 0L8
T: 905-845-9540 F: 905-815-5109

Milton Hospital
725 Bronte Rd. Milton, ON L9T 7H6
T: 905-876-7022 F: 905-876-7005

Georgetown Hospital
1 Princess Anne Drive, Georgetown, ON L7G 2B8
T: 905-873-4598 F: 905-873-4567

All net proceeds support hospital programs and services.

You may choose a publicly or privately funded physiotherapy clinic of your choice.

