

# orthoNY

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## POST-OPERATIVE REHABILITATION GUIDELINES FOR RTC REPAIRS

### Wound Care:

- Remove outer dressing on post-operative day 1. Keep steri-strips on (white band-aids).
- It is normal for some bleeding to occur. If blood soaks through the dressing, do not be alarmed. Reinforce with additional dressing.
- Keep surgical incisions clean and dry. Cover with plastic bag or Saran Wrap for showing. **DO NOT** immerse the operative site.

### Medications:

- If you have had a nerve block, it will wear off in several hours. Start taking the pain medication before the nerve block has lost its effectiveness.
- Take your narcotic pain medication only as needed and refer to direction on the bottle.
- Nausea and drowsiness are common side effects of narcotic medications. To decrease these effects, take medication with food.
- **DO NOT** drive, drink alcohol or take Tylenol products while taking narcotic pain medications.
- **DO TAKE** ibuprofen 600 mg (i.e. Motrin or Advil) in between taking narcotic pain medication. Take up to 600 mg, 3 times daily (1800 mg daily). This will reduce swelling and decrease narcotic use.

### Activity:

- You will remain in the immobilizer post-operatively until the nerve block is ineffective and feeling and control returns to the arm.
- **DO NOT** engage in activities that increase pain or swelling (lifting or any repetitive above shoulder level activities) during the first 7-10 days following surgery.
- Your immobilizer or sling should be worn at all times, except for hygiene and exercise for 4 weeks.
- You may return to sedentary work **ONLY** or school 3-4 days after surgery, if pain is tolerable.
- When sleeping or resting, reclined positions (reclining chair) may provide more comfort early in the post-operative period.
- **NO** driving until instructed to do so by your physician.

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**Ice Therapy:**

- Begin immediately after surgery – use a large bag of ice every 2 hours for 20 minutes daily until the first post-operative appointment.

**Exercises:**

- You may perform gentle range of motion exercises that include elbow flexion/extension, shoulder pendulums (see picture). Perform these as tolerated.

**Emergencies: (call the office at (518) 453-9088 for the following)**

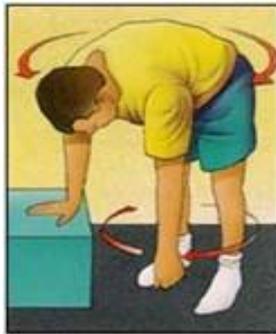
- Painful uncontrolled swelling or numbness.
- Fever or chills (fever over 101°F; it is common to have a low-grade fever for the first two days following surgery).
- Redness around incisions or color change in extremity.
- Continuous drainage or bleeding from incision site.
- Difficulty breathing or excessive nausea/vomiting.

\*If you have an emergency after hours or on the weekend, please contact the office at (518) 453-9088 and you will be connected to our page service, which will page one of our on-call providers.

\*If you require immediate attention, proceed to the nearest Emergency Room.

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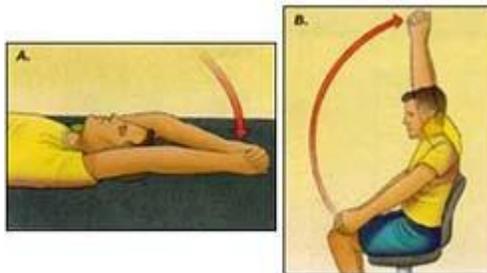
**Pendulum, Circular**



Bend forward 90 degrees at the waist, using a table for support.  
Rock body in a circular pattern to move arm clockwise 10 times, then counterclockwise 10 times.

Do 3 sessions a day.

**Shoulder Flexion (Assistive)**



Shoulder Flexion (Assistive)

Clasp hands together and lift arms above head. This can be done lying down (Image A) or sitting (Image B).

Keep elbows as straight as possible.

Repeat 10 to 20 times.

Do 3 times a day.

**Supported Shoulder Rotation**



Supported Shoulder Rotation

Keep elbow in place and shoulder blades down and together. Slide forearm back and forth.

Repeat 10 times.

Do 3 sessions a day.