

**Jason Stanford, DO**  
**516 S. Division St. Ste 125**  
**Cedar Falls, IA 50613**  
**319-268-3535**

## **PATIENT INFORMATION**

### **Rotator Cuff Repair**

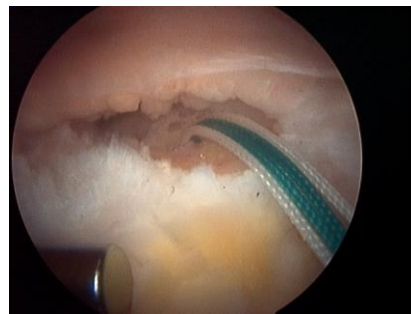
#### **DAY OF SURGERY:**

You will be taken to a “holding area” just prior to surgery.

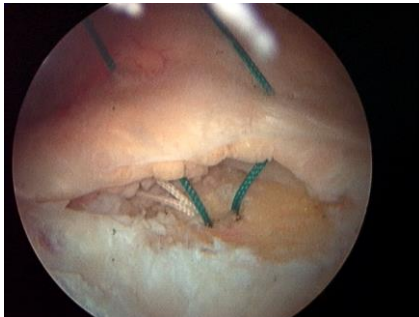
During surgery, an arthroscopy is performed to assess the entire shoulder joint as well as the rotator cuff tendons. Any additional injuries such as labral tears or biceps tendon injuries are treated. The rotator cuff usually sutured and reattached to its natural “footprint” with absorbable suture anchors.



Rotator cuff tear



Suture anchor in place



Sutures passed through tissue



Rotator cuff repaired

#### **POSTOPERATIVE ROUTINE:**

1. In recovery room your arm will be in a sling. Ice will be applied to your shoulder, which reduces pain and swelling. In general frequent icing is encouraged (i.e. every hour or two for at least 30 minutes at a time). You will be given an ice machine prior to discharge.
2. Pain medication is available as you need it. Prescription(s) for pain medication will be given to you prior to discharge. Usually you will be given a stronger pain medicine for the first few days following the surgery (i.e. Percocet).

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3. You may remove your dressing after 48 hours. There are small steri-strips (sometimes called butterfly strips) over the portal incisions – try to leave these in place until your first post-operative visit. You may place Band-aids over the portal incisions. If there is continued drainage a small piece of gauze and tape is preferable. If any drainage persists for several days, notify the office/physician.
4. Showering can begin after the dressing is removed. It is OK to let water run over the shoulder and then pat it dry. Do not soak, scrub, or apply any ointments to the portal sites.
5. Begin physical therapy within the first week to ten days after surgery. If you do not have a prescription, notify the office and a script will be sent to your therapist. It is acceptable to begin therapy prior to being seen by the doctor since the initial therapy visits will involve an evaluation by the therapist and initial motion exercises only.

**PRECAUTIONS:**

1. On occasion, you may develop a low grade fever. This is not uncommon. We need to hear from you if the fever is more than 101°.
2. Bruising may occur in your arm, which is a result of the surgery. This will decrease over the first week or two.
3. Swelling in your hand is a results of the surgery and inactivity of your. Squeezing a ball is helpful (especially while lying down with your arm across your chest)
4. If your calves become swollen and painful, please call the Doctor’s office.
5. Exercising may be painful, but is very necessary to ensure maximal ROM. You may require pain medication 15 minutes before doing exercises followed by icing the knee

**INITIAL POSTOP VISIT – OR 2 WEEKS POSTOP:**

1. See surgeon approximately 1-2 weeks after surgery
2. Physical Therapy 3 times per week working on ROM.
3. Generally, I do not recommend returning to work until after the first post-operative visit. If you have a “desk job” you may return to work when you are comfortable and only if no work is done with the operated arm.