

## Thomas F. Holoavacs, MD

### Subacromial decompression/AC joint resection Protocol

#### Patient information/instructions

3-5 Days leading up to surgery – Please see the pre-surgery packet for more detailed information

- Please see preop instructions for Arthroscopy at MGH West.
- Please set up your physical therapy appointments to begin 2 weeks after surgery.
  - o You will be provided with a Physical therapy prescription the day of surgery.

#### Immediately after surgery:

- You will be placed in a sling after surgery for 1-2 weeks. Passive range of motion only
- As the nerve block in your shoulder wears off you may need pain medication – you will receive a prescription for when you go home. This includes both oxycodone and Toradol. When Toradol runs out you may switch to ibuprofen/Aleve. As your pain improves, take Ibuprofen/Aleve sparingly.
- You may be instructed to take a 325 mg Aspirin for the purpose of protection against blood clots.

#### 24-48 hours after surgery

- Initial post op bandages should stay on for 48 hours. These bandages are water-tight and you may shower with them on.
- After 48 hours the bandage can be removed. When showering please cover the area with plastic wrap or another water tight bandage to keep it dry for the next 7-10 days.
- The steri-strips (thin white bandages directly over the incision) should remain on the incision until they fall off on their own.
- Remove the sling 3-5 times a day to gently move the arm **PASSIVELY** in a pendulum motion.

#### 7-14 days after your surgery:

- **Please arrange for a post-operative appointment with the PA/NP for follow up and additional instructions.**
- Begin motion - passive ROM, Pendulums immediately.

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### 1-6 Weeks after your surgery:

- All motion with the affected/surgical arm must remain **PASSIVE**.
- You may come out of the sling for showering and dressing but all movement should remain passive.
- You should remove your arm from the sling and **PASSIVELY** stretch several times per day. Appropriate stretching will be reviewed with you prior to surgery as well as with your physical therapist.
- If possible **we strongly advise pool therapy starting at week 2 for increased passive range of motion.** (This will be reviewed with you at your first pre-operative visit.)
  - o This is in addition to “normal” physical therapy. If your PT facility does not have a pool, you should get access to a pool independently for passive exercises that will be reviewed at your post op visit.

### 2-8 Weeks after your surgery:

- Once discontinuing the use of the sling (at 1-2 weeks post op), you may begin to use your arm for activities of daily living (eating, bathing, shaking hands...etc).
  - o At this point you still should not lift/push/pull or attempt to support your body weight.
- Schedule a follow up visit at 6-8 weeks after your surgery for follow up/monitoring.
- **IF APPROVED** by Dr. Holovacs, you will begin strengthening with the guidance of your physical therapist once you have pain free range of motion. As you initiate strengthening continue to avoid lifting heavy objects. No lifting anything heavier than a cup of coffee (no more than 1-2 lbs) at first.
  - o You may use your affected arm for normal daily activities involved with dressing, bathing and self care. You should not raise the arm when carrying objects greater than one pound. Any forceful pushing or pulling activities are to be avoided.

**\*\*\*\*\*Please keep in mind this schedule/protocol is patient dependent. Your timeline may be altered to assure appropriate progressions through rehab. Should you have any questions please feel free to call the office at (617) 726-0298\*\*\*\*\***

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### **ANSWERS TO FREQUENTLY ASKED QUESTIONS**

#### **How should I manage my wound site, dressing and steri-strips?**

- You may shower with a watertight bandage in two days, but keep the incisions dry for seven to ten days. Try not to let the direct spray of water from the showerhead hit the incision.
- Remove the large surgical dressing 48 hours after surgery. Allow the steri-strips to fall off on their own (this could take up to 3 weeks).

#### **Do I need to wear a sling/immobilizer? If so, how long do I wear it and when can I take it off during the day?**

- You will be instructed by your surgeon to wear your sling for about 1-2 weeks. You may wean the use of the sling as your pain/mobility improves.
- While in the sling, the elbow should be bent at a right angle, and the hand should be level with your elbow or slightly higher. The elbow should be resting slightly in front of your body.
- You may remove the sling for exercises as prescribed by the surgeon/therapist, icing, dressing, and showering.

#### **What are my precautions regarding movements and positions after surgery? What positions should I avoid?**

- Avoid lifting/pushing/pulling > 1-2 lbs until you reach pain free mobility.
- When lying on your back we recommend you put a towel roll under your elbow to support arm.
- Many patients find that lying on a 30 degree incline wedge in bed is more comfortable than lying flat. Some patients find sleeping in a recliner more comfortable during the first few weeks after surgery.

#### **May I use my involved arm for dressing, bathing, driving, and other daily activities? How should I manage my arm in the shower?**

- You may use your wrist, hand, and elbow for daily activities. This includes eating, shaving, dressing, as long as you do not move your operated arm away from your body and it does not increase your pain.
- Do not use your arm to push up/off the bed or chair.
- When using your keyboard and mouse, do not move your arm away from your body.
- When showering, you may wash under the involved arm pit by bending forward to let the involved arm hang freely and reaching under with the opposite arm
- Do not actively move your arm away from your body.

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### **When should I begin formal physical therapy? How often do I need to go?**

- Physical therapy can usually be initiated within the first 1-2 weeks following surgery. This includes physical therapy sessions at the clinic, in addition to a home exercise program for range of motion and postural exercises. You will eventually be prescribed strengthening exercises.
- If your PT practice requires a prescription prior to making an appointment we can fax one over with a tentative protocol. Please provide us with the fax number and contact information of the PT practice you have chosen for your therapy

### **When may I start strengthening? Are there any medications that I should not take during my recovery/rehabilitation?**

- You can take over the counter anti-inflammatories as needed. You can take Tylenol or any of the pain medications your surgeon prescribes. In addition, the use of frequent (3-4 times per day) icing of your shoulder will assist in pain management.

### **When may I return to recreational activities?**

- Return to activities is specific to the particular activity, but generally no sooner than 2-4 months. Always seek permission from your surgeon and therapist prior to starting any sports related activity.

Your recovery is individually based not only on tear size and tissue quality. Typically it will be at least 3-4 months before you are ready to return to pre injury/surgery activities. Some individuals take up to 1 year before they fully recover.

### **What is the process to have work notes, school notes, FMLA paperwork, and other documents filled out by Dr. Holoavacs office?**

- Please turn this paperwork in as soon as possible. This will allow time for it to be filled out prior to your procedure.
- Please make an effort to include as much information as possible. Fill out any personal information – name, DOB, address, date of injury, employer information... etc.
- Turn-around time for this paperwork is 7-10 days. Please understand the high volume of paperwork our office receives. We are unable to fill out this type of paperwork immediately/short notice.

### **When can I return to work?**

- Typically we recommend taking 1-2 weeks off of work for recovery. At that time we expect you will be off of pain medications and have more of your energy back.
- If you are able to return to work in a sling – you would be able to go to work at that time.

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- Keep in mind – you are not able to drive while in the sling.
- If your job requires any lifting, pushing or pulling > 1-2 lbs or does not allow you to work while in a sling you may need to take additional time off of work. If you need a work note please discuss this in advance with Dr. Holovac or Kendra Margulies (PA).