

When can I...

Drive: You will be permitted to drive (automatic transmission) 2 weeks after surgery as long as you are not taking any narcotics and you feel comfortable behind the wheel. Additionally, if you have a knee brace with ROM limitations then this will delay your return to driving. You may consider practicing in a large parking lot to make sure you can react quickly in an emergency. Studies suggest post- surgical patients wait 2 weeks before driving but life circumstances may mean you need to drive sooner than that, provided you meet the minimum requirements mentioned above.

Return to Work: This will vary depending on the demands of your job and surgical procedure. At a minimum we recommend taking at least 2 weeks off from work, if you can, as you will be fatigued from healing. If you have a sedentary job, you may be able to return to work at the 2 week time frame. Plan on getting up from your workstation to move around to prevent stiffness every 20 minutes or so. If you have a more demanding physical job, then light duty or alternative work may be instituted with advancements dependent on the surgical procedure performed.

Shower: You will be able to shower the second post-op day so long as you cover the incisions and keep them dry with a waterproof occlusive dressing. Remove the bulky dressing before placing the waterproof dressing. With respect to shoulder patients, while in the shower keep the affected shoulder at your side and any underarm washing will have to be performed with someone holding your elbow to prevent shoulder muscle activation. With respect to knee patients, WB restrictions should be followed. Once out of the shower remove the occlusive dressing, pat dry with a clean towel and place sterile Band-Aids. Washing of the actual incision sites is delayed until after the 1st postop visit and 24 hrs after sutures have been removed.

Use a Hot tub: Do not use a hot tub or bathe until sutures have been removed and wounds are completely closed. Typically, 3 weeks postop.

Remove sutures: Your sutures will need to be removed approximately 14 days after your surgery at the 1st postop visit. The sutures need to be removed using a sterile suture removal kit, please do not try to remove them at home on your own.

Do Dry Needling: To reduce the risk of infection, please wait at least 6 weeks before dry needling.



Get a Massage: Massage can be done as early as 3 weeks out. Inform your massage therapist of your recent shoulder or knee surgery. Let them know not to push into painful ranges of motion.

Wrist ROM: "active assist" ROM may be initiated for supination (palm pointing upwards), and "active" ROM for pronation and wrist flexion and extension.

Sleep: For shoulder patients, most initially find sleeping in a semi reclined position the most comfortable. This can be accomplished either by sleeping in a recliner or in bed with multiple pillows. For knee patients, elevation of the affected extremity to heart level is ideal with pillows.

Side Sleeping: For shoulder patients, most can sleep on their operative side once the sling is discontinued. Sleeping on the nonoperative side can begin 3 weeks postoperatively with the sling in place. Knee patients have no restriction so long as their brace is utilized as prescribed.

Wean off crutches: Your initial weight-bearing (WB) restriction will vary depending on the surgical procedure but can vary between a few days up to 6 weeks. Initial WB will be done 20 lbs. foot flat which is essentially resting your operative leg on the floor. After this initial period, you will transition to 50% weight-bearing for 1 week. When it is time to begin weaning from crutches, do so with the supervision of your physical therapist. The following week you will begin weaning off crutches with short walks in the house and progressing to 75% on longer outings for approximately 3-4 days. It is not unusual for you to experience mild increased soreness and fatigue as you make this transition. However, it should improve daily. After several days and if you aren't experiencing any additional soreness, you will progress to 90%, and then finally 100% following the same guidelines above. The GOLDEN RULE to determine your readiness to not use crutches is NO LIMPING. If you can't walk without a limp, you are not ready. Use your crutches as much as you need to take away the limp. It is far more important to walk properly without a limp than to push for a goal or timeframe. While weaning, have your crutches nearby for when you get tired or sore. It is normal to switch between no crutches and 2 crutches throughout the day, depending on how you feel. Always work on good technique and have your PT monitor.

Activity during the immediate postop period: Daily walks: 10 minutes on stable ground with a care giver, following the prescribed WB and brace restrictions, is allowed when tolerated. Ankle pumps, quad isometrics, gluteus and transverse abdominis muscle contractions should be performed 10x every hour starting postop day 1. The use of the Incentive Spirometer should be done immediately and be performed 10x every hr while awake.



Shoulder Pendulums: we recommend passive pendulums for a total of 6 weeks after your surgery and these should be performed 3x a day. Each session is done with 10 circles clockwise and 10 circles counterclockwise x 3. These are performed by your caregiver with you seated and your shoulder resting comfortably at your side and your elbow flexed 90 degrees and the forearm in neutral. Pendulums can also be performed by yourself and your therapist will help direct you with respect to proper technique.

Elbow ROM: "active assist" ROM (using your other arm to assist with motion) may be initiated for flexion and "active" ROM (using the involved extremity to perform the motion in its entirety) for extension.

Remove my Sling and abduction pillow: the use of a sling can range from a few days up to 6 weeks, the exact time will be determined at the completion of your procedure. The pillow portion is sometimes discontinued at the first PO visit or, at times, 4-6 weeks after surgery.

Remove my Knee Brace: This is based on the procedure performed and will be determined once the surgery has been completed.