
Patient Surgery Discharge Instructions

Proximal Humerus Open Reduction Internal Fixation

These instructions are intended to guide your recovery to be as smooth as possible. Always follow any additional instructions given by Dr. Mayo or his team, contact the office if you have questions.

Activity

Weight Bearing/Motion

- You should not place any weight through your arm or lift any amount of weight until cleared to do so by Dr. Mayo

Sling

- Your sling and/or abduction pillow must remain on AT ALL TIMES except to change clothes and to bathe. Keep your arm hanging directly at your side when you do this.

Driving

- You may not drive until cleared to do so by Dr. Mayo or his team. It is unsafe to operate a vehicle while in a sling and/or taking narcotic medication.

Sleeping

- You may find it more comfortable to sleep propped up in bed or in a reclining chair/couch.

Physical Therapy

- Your physical therapy needs will be discussed at your postoperative visit.
- You can do the following home exercises several times per day until then.
 - Shoulder shrugs (up and back) and postural exercises
 - Elbow, wrist, and hand range of motion can begin on the first day. You should perform these exercises 4 times per day as tolerated.

Smoking

- Refrain from smoking as it can interfere with healing.
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Pain Control

Postoperative pain is common but should be controlled by these interventions.

Ice Therapy

- Apply ice or use your cold therapy unit, if you have one, as often as you can tolerate for the first several days after surgery. Wear it over your clothing. Change the water every 4 hours while awake.

Pain medications

- Tylenol (Acetaminophen) 500 mg
 - Take every 6 hours for 1 week (scheduled, not as needed) to control your pain.
 - After 1 week, take it as needed.
- Naproxen 500 mg – this is an anti-inflammatory pain medication.
 - Take twice a day (scheduled, not as needed) to control your pain.
- Oxycodone 5 mg – this is a narcotic pain medication. Take as instructed below.
 - Day 0-1: Take 5 mg every 4 hours as needed for pain.
 - Day 2-3: Take 5 mg every 6 hours as needed for pain.
 - Day 4-6: Take 5 mg every 8 hours as needed for pain.
 - Day 7-8: Take 5 mg every 12 hours as needed for pain.
 - Day 9: Take 5 mg before bedtime as needed for pain.
 - Do not take more than prescribed. After this continue with acetaminophen.



- This is the only prescription for a narcotic pain medication that we will provide. Any additional pain medications after this will need to be provided by your primary care physician.

Other Medications

Blood Thinner

- Aspirin (Ecotrin) 81 mg – this is to help prevent blood clots after surgery.
 - Take twice a day for 28 days whether you are having pain or not.

Other Medications

- Promethazine (Phenergan) 12.5 mg – this is to help with postoperative nausea.
 - Take every 6 hours as needed for nausea/vomiting for up to 7 days.
- Colace 100 mg – this is an over the counter medication for postoperative constipation.
 - Take twice a day as needed for constipation.

Home Medications

- Resume or hold home medications as directed in your discharge papers.

Dressings/Bathing

Bandages/Dressings

- Keep your bandages clean.
- If your dressings get saturated with blood, please call the office at the number below for instructions.
- Leave your bandage on for one week then it is OK to remove it. OK to get wet at that point
- Postoperative bleeding is not unusual. Reinforcing your dressing is alright. If you have concerns about the amount of bleeding, please call.

Showering/Bathing

- You can shower immediately as long as your bandage is well sealed and no water can get under the bandage
- You can shower after the dressings are removed with gentle scrubbing, pat dry
- No soaking in a bathtub or any swimming (pool, hot tub, lake, river, etc.).

Follow-up & When to Call

- Follow-up will be in approximately 1-2 weeks with Dr. Mayo or his team. If you do not have an appointment already scheduled, please call the office number above.
- If you have *any* concerns about your recovery, feel free to call our office. It is better to check early rather than wait if something seems wrong
- Call the office promptly and/or report to the Emergency Department for evaluation if you develop any of the following: signs or symptoms of infection, including fever >101.5, marked increase in pain, new redness, or increased drainage, particularly purulent drainage, or if you develop unusual chest pain and/or shortness of breath, significant calf swelling, tightness, or pain.
- Call the office or seek medical attention if you have calf swelling, redness, or pain; this can be a sign of a blood clot (DVT).
- If your fingers become cold, discolored, or you feel increased numbness or tingling, loosen the sling and/or bandages slightly and call the office if symptoms do not improve quickly.
- If you have *any* concerns about your recovery, feel free to call our office. It is better to check early rather than wait if something seems wrong

