

## Dr. Weldon's Discharge Instructions: **UPPER EXTREMITY**



**After Anesthesia:** Rest today, it is not unusual to feel sleepy or tired for a day or so after your surgery. No strenuous activity. You may feel a sore or "scratchy" throat after general anesthesia. This will go away in a day or two. A low-grade fever is common after any surgery with general anesthesia and is rarely due to infection. Resume taking prescription medication, unless your doctor instructs you otherwise. Resume eating normally. Start with gentle, soft foods; avoid greasy or spicy foods which may cause nausea.

---



**Dressing and Wound Care:** Keep the dressing clean and dry for the first 2 days after surgery. Sponge bathe or cover with plastic to shower. After 2 days, remove outer dressing. Leave steri-strips (small white stickers) in place. On day 3 after surgery, it is okay to shower and lightly wash the incision with soap and water. Pat to dry. Do not apply ointments or creams. DO NOT submerge your incision in water, tub, ocean or pool for at least 2 weeks.

---



**Medical Equipment:** If you received a sling, wear it until the numbness or nerve block has worn off (usually 12-24 hours). After that, you may wear it for comfort if you want, but it is not required.

---



**Activity:** It is okay to walk around freely. Your surgeon will give you specific instructions on when it is okay for you to resume various movements, activities, work, sports, exercises etc.

- ☐ **Shoulder surgery:** Do not lay flat to sleep. Keep head/shoulders propped up on pillows, or rest upright in a recliner chair.
  - ☐ **Surgery on hand or arm:** keep it elevated, whenever possible, to reduce pain and swelling.
  - ☐ \_\_\_\_\_
- 



**Pain:** Don't wait until your pain is severe before taking pain medicine. Follow instructions on the label and use as directed. DO NOT take NSAID's (Advil, Ibuprofen, Celebrex, Naproxen, Motrin, etc.). Taking NSAID's will impair healing.



**DO NOT** drink alcohol or use marijuana when taking prescribed opioid pain medications.  
**DO NOT** drive until you are OFF prescription opioid pain medications.

---



**Nausea / Constipation:** Anesthesia and pain medications can cause nausea and/or constipation. Take prescription pain medicine with food to reduce nausea. If you develop constipation, try to discontinue opioid medications (Tramadol, Oxycodone, Percocet, etc.) as able and take over the counter stool softeners (Senna, Dulcolax, Miralax, etc.) with plenty of fluids and high fiber foods.

## Dr. Weldon's Discharge Instructions: **UPPER EXTREMITY**



**Itching / Rash:** If you develop MILD itching or rash, take over-the-counter allergy medicine such as Benadryl, Claritin, or Allerest. If you have a SEVERE reaction or have any difficulty breathing, call 911 or immediately go to the nearest emergency facility.



### **Call the Doctor's Office if you experience any of the following:**

- Fever is above 101.5°F and/or chills.
- Nausea or throwing up to where you can't keep food/ liquids/ medication down.
- Unable to pee or "shi-shi" for 24 hours.
- A lot of pain, even with medication.
- A lot of swelling around the surgery site, persistent numbness, dark or pale color in fingers.
- Pus type drainage, or excessive bleeding through the dressing.
- Leg/calf pain, swelling, redness or tenderness.



**Dr. Weldon's office @ 808-522-4232** Monday-Friday 8am-4:15pm  
After office hours call the 24/7 Straub after hours hotline @ 808-522-4000



If you need IMMEDIATE ATTENTION (such as difficulty breathing)  
**Call 911 or go to the NEAREST EMERGENCY ROOM**

**Follow Up:** A nurse from MIS Hawaii will be giving you a post-operative follow-up call within a few days. If you have additional questions, please call your doctor listed above.



Your follow up appointment is scheduled for:

*As scheduled, if you have not made one, please call 522-4232*



The discharge instructions were explained to me and I have received a copy of these instructions. I understand these instructions are necessary for continuing medical care after I (the patient) leave MIS Hawaii.

Patient or Authorized Person Signature

Nurse Signature

Date/Time