



# Upper limb (shoulder and elbow) surgery: aftercare advice

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## Information for patients

The following advice is for patients who have had upper limb surgery. It outlines how you should look after your wound following surgery and when you can expect to return to your normal activities. If after reading this you have any questions, please speak to your consultant (their contact details are at the end of this leaflet).

### Your follow-up appointment:

**Where:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Time:** \_\_\_\_\_

### How long will my wound(s) take to heal?

Wounds usually take between 10 to 14 days to heal. The area around your wounds may be numb for several weeks or months after surgery; this is normal. You may feel occasional sharp pains or 'twinges' near your scar, as it settles.



## How do I care for my wound at home?

After your operation, you will have a 5cm wound on the outer side of your elbow, which will be covered with a dressing.

It is important to keep your wound and dressing dry and in place until your wound is well healed, and have your stitches removed at your two week follow-up appointment with your GP practice nurse or at the hospital, with your surgeon or your nurse practitioner (surgical care practitioner). You will be told where your follow-up appointment is going to be before you leave the hospital.

If the dressing gets wet or bloodstained, you can change them yourself by carefully placing a dressing from a pharmacy. If you are unable or have difficulties doing this yourself, you can ask a relative or a friend to change it for you, or you can make an appointment with your GP practice nurse to do it for you.

**If you are being seen by your GP practice nurse for a wound check 10 to 14 days after your surgery, please make sure the nurse reads the following. These instructions are for healthy looking surgical wounds only.**

- **\*Colourful stitches are non-absorbable and need to be completely removed to avoid them getting buried under the patient's skin.**
- **\*White/clear stitches are absorbable. If any suture knots have been made outside the patient's skin, please remove these to avoid suture abscesses. Thank you.**

**\*The appearance and material of the sutures can be different from Trust to Trust, but these are the most common.**

**If a wound does not seem to be healing appropriately, please leave the stitches/knots in place and make another appointment to remove them in few days.**

## What if my wound bleeds at home?

Although you will not be sent home with a bleeding wound, occasionally minor oozing or bleeding may happen in the first day or two. If your dressing gets wet or soaked, it may need to be replaced by your GP practice nurse, unless you are told otherwise. This bleeding or oozing can be controlled by pressing firmly but gently on the wound for 15 minutes.

Heavy bleeding (when bleeding continues for more than five minutes with high volumes of more than a quarter of a cup of blood) should raise concern. Apply pressure to your wound and go to your nearest walk-in centre or Emergency (ED) Department immediately.

### **Can I have a bath or shower?**

You should have a 'dry wash' or a shallow bath instead of a shower. This keeps your arm in the correct position and prevents your dressing and sling/wedge from becoming wet.

After your dressing has been removed at your follow-up appointment:

- do not use soaps, lotions, creams, or powders on your wounds, to avoid any infection getting into your wound
- when cleaning your wound area let clean water wash over your wound gently; do not rub or try to clean it with your hands as this would cause pain and prevent healing
- dry your wound by carefully patting it with a clean towel.
- sling on when sleeping, to prevent injury.
- How long you have to wear your sling for depends on the surgery you have had. Please refer to your surgery specific information for details.

### **What if I have any questions or concerns?**

If you notice your wound area is becoming more painful, red, hot, and/or discharging pus (thick yellow discharge), you may be developing an infection. Contact your GP or call 111 for further advice.

An appointment will be made for you to see a specialist physiotherapist after your discharge from hospital. This appointment will usually be three to four weeks after your surgery. You will be monitored by a physiotherapist throughout your rehabilitation.

### **When can I return to my normal activities?**

This varies depending on the individual patient and the surgery they have had. Please discuss this with your surgeon, surgical care practitioner, or physiotherapist.

### **Why am I wearing a sling after my surgery?**

- You must use your sling, as advised by your surgeon, surgical care practitioner, or physiotherapist.
- You have less control of the movements of your arm when sleeping, so you must keep your

## Will I be in pain after my surgery?

After your operation, you will be taken to the ward until it is safe for you to be discharged home. You will be seen by your surgeon, surgical care practitioner, and/or physiotherapist before you go home. They will show you exercises to do and give further advice to guide you through your recovery.

If your anaesthetist has given you a nerve block you will not experience any pain straight away, as the block may take 12 to 24 hours to wear off completely. This means that immediately after your operation your shoulder and arm may feel completely numb and weak. This may last a few hours.

However, it is very important that you take your pain relief as advised and as early as you can before the nerve block wears off; this will help you to keep on top of your discomfort. It is advisable to take your painkillers regularly for the first few days, even if you think you do not need them. If possible, avoid non-steroidal anti-inflammatory medication, such as ibuprofen and naproxen, for at least 10 days before your surgery and six weeks following surgery. This is because anti-inflammatory medication could slow down the healing process.

You will be given painkillers when you leave hospital, to take at home; these should last for at least two weeks. This will be discussed with you before you leave hospital. Take the painkillers regularly, do not wait until your elbow/shoulder is very painful to take the pain relief, as it is then more difficult to control.

Ice packs or bags of frozen peas may also help reduce your pain. Wrap the pack/bag with a cloth and place it on your elbow or shoulder for up to 15 minutes. Do not use these peas for eating once they have defrosted.

If your pain continues and is not controlled with the medication you have been advised to take, then please contact your GP. You may also contact the East Kent Upper Limb Team if you need further help.

**If you notice your wound area is becoming more painful, red, hot, and/or discharging pus (thick yellow discharge), you may be developing an infection. Contact your GP for advice and the Upper Limb Surgical Care Practitioner (Specialist Nurse Practitioner) (if you have one).**

Take pain relief regularly to try and keep your level of discomfort at a bearable level at all times. This allows the inflammation (redness, swelling, and heat) and pain to settle. **Do not wait until your arm is very painful to take the pain relief, as it is then more difficult to control.**

## Do I need to get any stitches/clips removed and my wound checked?

Yes. The details of your follow-up appointment are on the front page of this leaflet.

## How can preparing well for my surgery, help my recovery?

You will have a preassessment appointment before your surgery, to check if you are ready and fit for surgery. You will also be swabbed for MRSA and Covid-19, if necessary.

Before surgery it helps if you try to get as fit as possible to avoid anaesthetic risk and/or failure of the surgery. It is important that you lose weight if you are above your ideal weight.

- **Smoking advice**

It is important to stop smoking at least 30 days before your surgery. Studies have shown that wound healing is significantly delayed by smoking/nicotine, and the infection rate is much higher. Smoking also has an effect on the time it takes for your tendons to heal following a repair, so smoking after your operation is also not advised.

If you need support to stop smoking you can ask your GP for advice, or contact the Trust's Stop Smoking Service either through the website [www.ekhufft.nhs.uk/patients-and-visitors/services/stop-smoking-service](http://www.ekhufft.nhs.uk/patients-and-visitors/services/stop-smoking-service), or call 0300 12 31 22 0, or text QUIT to 87 023.

- **How does eating a healthy diet help my recovery?**

Recovering from surgery can take a long time and it is normal to get frustrated and anxious. But remember that while you are recovering, there are some things you can do to help your wound to heal. We suggest limiting the amount of alcohol you drink, stopping smoking, eating a healthy diet, drinking plenty of fluids (especially water), and staying active. If you need any extra support, do not hesitate to get in touch with us on the contact numbers listed at the end of this leaflet.

Some painkillers (especially those containing Codeine) can cause constipation. To avoid this, please follow a healthy well-balanced diet rich in fruit, vegetables (including green leafy vegetables), nuts, seeds, wholegrains, and legumes, which contain the necessary fibre, and drink plenty of water. For more information on the importance of eating your 5-A-Day please go to the following web site [www.nhs.uk/live-well/eat-well/5-a-day-what-counts/?tabname=food-and-diet](http://www.nhs.uk/live-well/eat-well/5-a-day-what-counts/?tabname=food-and-diet)

**This leaflet has been produced with and for patients**

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

**Any complaints, comments, concerns, or compliments** please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email [ekh-tr.pals@nhs.net](mailto:ekh-tr.pals@nhs.net)

**Patients should not bring in large sums of money or valuables into hospital.** Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

**Further patient leaflets** are available via the East Kent Hospitals web site [www.ekhufft.nhs.uk/patientinformation](http://www.ekhufft.nhs.uk/patientinformation)

## Contact details

- **Consultants and their secretaries**

Hospital site	Consultant	Secretary name	Contact number
Kent and Canterbury Hospital, Canterbury	The teams listed below work at Kent and Canterbury Hospital as well		
Queen Elizabeth the Queen Mother (QEQM) Hospital, Margate	Mr Sathya Murthy	Tracy Blackman	01843 23 50 68
	Mr Georgios Arealis	Donna Cannon	01843 23 50 83
William Harvey Hospital, Ashford	Mr Paolo Consigliere	Heather Littlejohn	01233 61 62 80
	Mr Jai Relwani	Dione Allen	01233 61 67 37
	Surgical Care Practitioner	Patricia Velazquez-Ruta	07929 37 53 81

- **Physiotherapists**

Hospital site	Physiotherapist	Contact number
Buckland Hospital, Dover	Abi Lipinski	01304 22 26 59
Kent and Canterbury Hospital, Canterbury	Sarah Gillett (inpatient)	01227 86 63 65
	Darren Base	01227 78 30 65
Queen Elizabeth the Queen Mother (QEQM) Hospital, Margate	Caroline Phillpott (inpatient)	01843 23 45 75
	Martin Creasey	01843 23 50 96
Royal Victoria Hospital, Folkestone	Ailsa Sutherland	01303 85 44 10
William Harvey Hospital, Ashford	Cindy Gabett (inpatient)	01233 63 33 31
	Chris Watts	01233 61 60 85

- **Surgical Preassessment Units**

Hospital site	Contact number
Kent and Canterbury Hospital, Canterbury	01227 78 31 14
Queen Elizabeth the Queen Mother (QEQM) Hospital, Margate	01843 23 51 15
William Harvey Hospital, Ashford	01233 61 67 43

- **Fracture Clinics**

Hospital site	Contact number
Kent and Canterbury Hospital, Canterbury	01227 78 30 75
Queen Elizabeth the Queen Mother (QEQM) Hospital, Margate	01843 23 50 56
William Harvey Hospital, Ashford	01233 61 68 49