



**STERLING RIDGE  
ORTHOPAEDICS  
& SPORTS MEDICINE**

Mark A. Eilers, MD, MS, FAAOS  
Orthopedic Sports Medicine  
Arthroscopic, Trauma, & Reconstructive Surgery

**POST-PROCEDURE INSTRUCTIONS**  
**SHOULDER MANIPULATION UNDER ANESTHESIA (MUA) vs**  
**LYSIS OF ADHESIONS (LOA)**

**PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION  
IF NECESSARY – DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE  
HOSPITAL OR VIA PHONE TO DR. EILERS STAFF AFTER ARRIVING HOME**

**OFFICE NUMBER: 832.698.0111**

**WHAT CAN I EXPECT AFTER THE PROCEDURE?**

- Pain, swelling, and bruising are not unusual after surgery.
- It is normal to feel drowsy, dizzy, or weak 24-48 hours afterward.
- An upset stomach (nausea), vomiting, fatigue, and a low-grade fever (not over 101.4°F) are possible due to medication you received during surgery. These usually improve within 24 hours.

**ICE THERAPY**

- Begin immediately after surgery and continue until the first post-operative visit.
- If using a 'cryo-cuff' or similar ice/compression device, use as directed in the instruction manual.
- When using "real" ice, avoid direct skin contact > 20 mins to prevent damage/frostbite of skin.
- In either case, check the skin frequently for excessive redness, blistering or other signs of frostbite.

**ACTIVITY**

- Increase your activity each day as you feel comfortable.
- **Weight-bearing status:** weight bearing as tolerated through operative extremity.
- May start driving when not taking narcotic pain medications or muscle relaxers, when discontinues sling and has adequate function of the shoulder/arm. Do not drive if still taking narcotic pain medications, muscle relaxers, or still requiring sling. Most patients are not able to drive for the first 3-4 days after procedure and may take up to a week before comfortable to drive.

## **PHYSICAL THERAPY**

- You will begin physical therapy the same day as the procedure, and daily for thereafter for the first week. Call our office if you do not already have a physical therapy appointment set up.
- Participate in physical therapy and fulfill the home exercises as instructed by the physical therapist. It is crucial to perform your home exercises/stretchers several times every day to help maintain motion and prevent scar tissue recurrence.
- Stiffness and discomfort of the operative extremity is normal for a few days following surgery
- Do ankle pumps (15-20) at regular intervals during the day to reduce the possibility of a blood clot in your calf.

## **SLING**

- Wear the sling until the nerve block wears off (1-2 days).
- Remove the sling when sedentary to work on shoulder ROM exercises.
- Once the nerve block wears off, discontinue the sling and use the shoulder/arm for normal activities
- Please contact our office and ask to speak with DME personnel with any sling or brace questions.

## **DIET**

- Drink plenty of fluids. If you are taking pain medication, do not drink alcohol.
- Start by drinking small amounts of fluids, such as water, clear carbonated beverages, tea, or soup.
- Gradually add bland foods to your diet, such as dry toast or crackers.
- Start with light meals. Resume your regular diet as you feel comfortable.
- Pain medications can cause constipation. Eat fiber (fruits and vegetables) and drink plenty of fluids.
- Take the prescribed stool softener as directed if taking narcotic pain medications.
- If loss of appetite following surgery, use Boost or Ensure meal replacement shakes for nutrition.

## **EMERGENCIES**

- Contact the office if you are having any of these symptoms:
  - Painful swelling or numbness that progressively worsens
  - Fever of 101°F (38°C) or higher
  - Unrelenting pain
  - Persistent nausea and/or vomiting
  - Excessive bleeding or fluid from the surgical site
  - Symptoms of deep vein thrombosis (DVT) such as swelling, redness, warmth, or pain in your calf
  - Inability to urinate
  - Increased drowsiness from pain medication. Stop taking pain/narcotic medication if you become too drowsy
  - Increased or foul-smelling drainage from incision site
  - Significant redness, tenderness, or swelling around the incision
  - Separation of the skin closures

**IF YOU HAVE A NEED THAT REQUIRES IMMEDIATE ATTENTION, PROCEED TO THE NEAREST EMERGENCY ROOM OR CALL 911**