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At UT Southwestern Medical Center, we want your shoulder surgery and recovery to go as smoothly as possible. Our orthopaedics team will be by your side throughout your surgical journey. This guide will help you prepare for surgery and better understand what to expect during and after surgery. Working together, we can get you back to normal activities in a safe and timely manner. Thank you for choosing us to be your surgical team.

Your Guide to a Successful Surgery

You are in great hands at UT Southwestern. We rank among the best hospitals in the nation for orthopaedics, according to *U.S. News & World Report*. This recognition is based on a number of categories, including patient outcomes, volume of high-risk patients, key programs, services and staff, and professional recognition of the hospital. UT Southwestern has one of the most comprehensive orthopaedic practices in North Texas. Our board-certified orthopaedic specialists are leaders in the newest surgical procedures available. We offer comprehensive surgical treatment plans that incorporate physical therapy before and after surgery for optimum results.
Use this booklet to help guide you through your shoulder surgery journey.

- Bring it with you to appointments and during your hospital stay.
- Review important dates, complete the checklists, and learn more about what you should and shouldn’t do before and after surgery.

- Find key phone numbers inside.
- Use it to write down questions and take notes.

MyChart
Electronic Medical Record

UT Southwestern offers patients an online health resource for communicating with your health care providers, requesting appointments and prescription renewals, and accessing portions of your electronic medical record using an encrypted, secure internet connection.

If you are not already using MyChart and would like to, please call the help line at 214-648-8888, or ask for a sign-up link at your next appointment.
# Important Dates and Activities

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If you have any questions, please contact:

**UTSW Frisco Orthopaedic Department, 469-604-9070**
A team of orthopaedic professionals will care for you during your surgical journey. This team is committed to keeping you safe and providing compassionate, world-class treatment and services. Your comprehensive care team includes:

**Orthopaedic Surgeon**

Your surgeon and surgical care team will guide your care and perform your shoulder surgery.

**Advanced Practice Provider**

The advanced practice provider (a physician assistant or nurse practitioner) will work with your surgeon and other members of the team to manage your care.
Anesthesia Team

An anesthesia physician or advanced practice nurse will evaluate your anesthesia needs. This team is specially trained to keep you safe during surgery and in recovery.

Registered Nurse (RN)

A registered nurse will work with your surgeon and other members of the team to manage your care. Your nurse is trained in orthopaedics and will follow your surgeon’s plan for your recovery. The nursing team will teach you how to stay safe and healthy during the various stages of your journey.

Physical Therapist (PT)

Your physical therapy team will plan the best way for you to be your strongest after surgery.
Getting Healthy for Surgery

It’s important to be and feel as healthy as possible in the weeks leading up to your surgery. Review this section to take an active role in your health as you prepare for surgery.
Get Surgical Clearances

You must see your primary care physician for surgical clearance. You might also need clearance from your cardiologist, rheumatologist, neurologist, or other specialist. Your care team will let you know if additional clearances are required.

Choose a Personal Champion

- The person you pick will motivate you to be your very best during your journey. Select a family member or friend who can be by your side to help you complete your checklists and be successful.
- Your personal champion will help you meet your surgery planning and recovery goals. He or she will be a second set of ears to learn with you as you attend your appointments.

- Your personal champion will help you become independent faster. He or she will learn the appropriate exercises you should do and encourage these daily activities when you go home.
- When you first arrive home, it would be helpful to have your personal champion stay with you for a few days or visit daily. This home support will encourage you during your recovery journey.

Stop Smoking – It Will Help You Heal Faster

When you stop smoking, your body recovers faster and infection can be prevented. We want to provide you with the best outcome; therefore, we highly recommend prior to surgery that you quit smoking or using any products that contain tobacco or nicotine.

This includes:
- Cigarettes, cigars, etc.
- Smokeless tobacco/dipping
- E-cigarettes/vaping
- Hookah
- Nicotine patches and gum

Please consider UT Southwestern’s free tobacco cessation program to help you quit smoking or using tobacco products. It is led by facilitators certified in nicotine cessation. The program can help you change habits, reduce stress, and prevent relapses. Call 888-980-6050 or email canceranswerline@utsouthwestern.edu for more information or to register.
Pay Attention to Nutrition

Start taking a multivitamin and increase your protein intake

Eat well-balanced meals to be healthy for surgery. In addition, one month prior to surgery:

- With the approval of your doctor, begin taking a multivitamin with iron, calcium, vitamin D and zinc once a day.
- Begin drinking a nutritional protein shake or eating a protein bar once or twice a day.

Stop Certain Medications and Supplements Prior to Surgery

Make a list of your medications to go over with your care team. Pay attention to which medications you must stop prior to surgery.

Medications to STOP taking seven days prior to surgery:

- Fish oil/omega-3 fatty acids
- Herbal supplements (ginkgo biloba, ginseng, echinacea, ephedra, Saint John’s wort, ginger, garlic, dong quai, hoodia). Herbal products need to be treated as medicine, and natural substances can be harmful.
- Injectable medications used weekly for Diabetes or weight loss, including Ozempic (semaglutide), Trulicity (dulaglutide), and Bydureon (exenatide extended release)
- Anti-inflammatory medications such as ibuprofen and naproxen
- Decongestants (Mucinex-D, Sudafed, pseudoephedrine or phenylephrine products)
- Narcotic pain medications (discuss this with your orthopaedics team)
- Aspirin

Medications to STOP taking the morning of surgery:

- Blood pressure medications ending in –pril or –sartan (losartan (Cozaar), lisinopril (Prinivil, Zestril), ramipril (Altace), olmesartan
medications for rheumatoid arthritis, psoriatic arthritis, or inflammatory arthritis.

If you have any questions, do not hesitate to ask your surgeon or any orthopaedics team member.

Take Control of Diabetes

It is very important to control your blood glucose levels during your journey. Doing so helps you heal faster, prevent wound complications, and assist in preventing infection. The orthopaedics team can assist you with controlling your glucose levels.

Prepare to Return to Work

If you work, start planning for when you can go back after surgery. Ask your surgeon’s office for an estimated back-to-work date. Your care team will help you prepare to go back to work, but keep in mind that the type of work you do will determine how soon you can safely return. Contact your employer for the appropriate paperwork, and fill out your portion before bringing it to the clinic.

You must tell your orthopaedic surgeon if you are on any anticoagulants (blood thinners), prednisone, or other medications.

(such as Tylenol) as needed for pain and as directed on the bottle or by your care team.

You may continue taking any acetaminophen product (Benicar), benazepril (Lotensin), irbesartan (Avapro), enalapril, valsartan (Diovan), captopril, azilsartan (Edarbi), fosinopril, telmisartan (Micardis)
To help ensure a successful recovery, you will need to prepare your home and secure necessary equipment beforehand. This section will guide you on what to do.
Take the following steps to make your transition easier once you return home after surgery.

- Make/purchase healthy, easy-to-prepare meals.
- Put your favorite things in places you can easily reach them.
- Delay your mail or arrange for someone to pick it up for you.
- Secure help for taking care of any children and/or pets.
- Secure someone to do your yardwork.
- Do laundry prior to surgery.
- Clean your home prior to surgery.
- Make sure all stairs inside and outside have a sturdy railing.

- Clear all pathways where you walk.
- Pick up, remove, or be aware of anything that could be in your way or could cause you to slip or trip. This includes loose rugs, uneven surfaces, wires, and cords.
- Make sure areas where you will be walking are well lit. Replace light-bulbs that have burned out, and consider adding extra lighting to dimly lit areas.
- Be sure you have several loose-fitting shirts or button-up shirts for after surgery.
- Know where you will be attending physical therapy and ensure the facility takes your insurance.

Borrow or purchase any other items that will help you become independent after surgery. Review the list of equipment you’ll need on the following page.
The following is a list of equipment you will need to be independent and safe at home after surgery.

**Specialized Ice Machine**  
(ice helps control pain and reduce swelling)

- You will have the OPTION to purchase a specialized ice machine (not covered by insurance).
- A representative from the ice machine vendor will contact you.
- If you choose to purchase a machine, it will be delivered to you in the hospital or to your home.
- The representative will explain how the machine is programmed and how to wear the pad that comes with it. You will have an opportunity to ask questions and ensure a proper fit.

**Recliner**

While this is **NOT** required, most patients find it more comfortable to sleep in a recliner the first few weeks after surgery. You can also try placing pillows behind your operative arm to give it more support while lying in bed.

**Sling**

A sling will be placed on you after surgery, even before you leave the operating room. Be sure you feel comfortable with how to take it off and put it on prior to leaving the hospital. If you have questions
or are confused, please ask a nurse. The sling should be worn only while sleeping and when you are out and about, unless you are instructed otherwise.
Presurgery Countdown

It will take some time and effort to get ready for your surgery. Read the information in this section carefully, and ask questions if you need any clarifications.
5-12 Weeks Before Surgery

CT Scan

A CT scan is mandatory to help plan for your surgery and ensure the implants used are the best fit for your body. An order was placed by your surgeon during your clinic visit for this imaging to take place at Texas Health Frisco. It must be completed at least five weeks prior to your surgery to allow for adequate planning. Please note, this is a special type of CT scan, and it’s best for it to be completed at the hospital. Texas Health Frisco’s CT department can be reached at 469-495-1099.

2-4 Weeks Before Surgery

Pre-Anesthesia Testing

You will receive a phone call from the Ortho Program Coordinator to set up your pre-anesthesia testing (PAT) appointment. This is a meeting to discuss your medical history and ensure you are ready for surgery. You will get labs and a nasal swab at this appointment as well. The nasal swab will be performed to detect if you are a carrier for methicillin-resistant *Staphylococcus aureus* (MRSA). An EKG or chest X-ray may also be performed as needed. The team will go over your list of current medications with you and discuss which ones you should stop using prior to surgery. Some of your tests may be performed at your primary care office. Only tests that haven’t been done yet will be performed at your PAT appointment. Texas Health Frisco’s PAT Department can be reached at 469-495-2180. The Ortho Program Coordinator’s phone number is 469-495-2131.

Presurgery Exercises

In order to have the best outcomes after surgery, we recommend you work on a couple of exercises to strengthen the bigger muscle groups in your shoulder prior to surgery. Illustrated are the first two exercises we will have you do after surgery when we see you at your post-op appointment. The sooner you start them, the quicker you will be back to using your arm as you did before.

Shoulder blade pinches (scapular retraction): Bend both elbows to 90 degrees and pull back, pinching your shoulder blades together as if you are trying to hold a pencil between them. Hold for a few seconds and relax. Do this 20 times, twice daily.

Lying overhead lift (passive supine forward elevation): Lie down flat on your back with both arms by your side. Raise one arm straight up in front of you, and bring it as far back as you can toward the floor above your head. You may use your other arm to help if needed. Move your arm back down by your side. Do this 20 times, twice daily.
POSH Program Available to Help Seniors Prepare for Surgery

Presurgery Service

The UT Southwestern Perioperative Optimization of Senior Health (POSH) Program provides comprehensive evaluation of older adults who are planning to undergo surgery. It is designed to ensure surgery for our older patients is safe and that their recovery is smooth.

Postsurgery Service

After the procedure, UTSW POSH care team members will continue to provide consultative management of medical comorbidities, make recommendations for delirium prevention, and assist with a safe transition out of the hospital. Please let us know if you would like more information about this program, or call 214-645-8600 to contact the POSH Program directly.

Reminder: We recommend you stop smoking and/or using any products that contain tobacco or nicotine.

Secure After-Surgery Equipment

Review the “Medical Equipment Needs” list on Page 12.
The Week Before Surgery

Follow these instructions for safety and infection prevention.

**Medications to STOP Seven Days Prior to Surgery:**

- Fish oil/omega-3 fatty acids
- Herbal supplements (ginkgo biloba, ginseng, echinacea, ephedra, Saint John’s wort, ginger, garlic, dong quai, hoodia).
- Anti-inflammatory medications such as ibuprofen and naproxen
- Decongestants (Mucinex-D, Sudafed, pseudoephedrine or phenylephrine products)

Herbal products need to be treated as medicine, and natural substances can be harmful.
• Narcotic pain medications (discuss this with your orthopaedics team)

• Aspirin

You may continue taking any acetaminophen product (such as Tylenol) as needed for pain and as directed on the bottle.

**Expect a Phone Call Confirming Your Time of Surgery**

This will come from the hospital.

**Know where you will be attending physical therapy**

Inform us where you will be going to physical therapy, so we can fax your orders and instructions to the correct location.

**Secure After-Surgery Equipment**

Review the Medical Equipment list on Page 12. Outside vendors will be contacting you (if they have not already) about securing a specialized ice machine (optional).

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**Do You Think You May Have an Infection?**

Call your surgeon’s office if you feel sick or think you may have an infection of any kind, such as a respiratory, bladder, skin, or tooth infection.

**Do You Have Any Open Wounds?**

Check your skin for open sores, wounds, and rashes. If you have any questions, call your orthopaedic surgeon’s office. Open wounds can increase your risk of an infection.

**Complete the “Home Readiness Checklist” on Page 11.**
2-3 Days Before Surgery

Please review the following information to help you prepare as your surgery date nears.

Medical Equipment

If you ordered equipment from representatives of the vendors with which UT Southwestern works, it will be delivered to the hospital on the day of your surgery or to your home.
If You Have Not Already, Please Complete the “Home Readiness Checklist” on Page 11

Having your home in order and ready for your return will help ensure a successful and quick recovery.

Pack Your Bags

Review the “What to Bring” checklist on Page 23.

Although most patients go home the day of surgery, it is suggested you have an overnight bag in case you need to stay for further monitoring.
Night Before Surgery

Please review each of these items and follow the instructions.

- **Eat a light dinner.** Remember that you can’t eat, drink, chew gum, or use lozenges after midnight the night before your surgery.

- **Nail polish.** Remove all nail polish from your fingers and toes.

- **Medication.** If you have medication to take the morning of surgery, you may do so with small sips of water.

  It is especially important to remember the following:

- **Don’t shave.** Avoid shaving near the area where you will be having surgery.
- Do not use any lotion, powder, makeup, deodorant, or perfume.
- Wear freshly washed clothes and sleep in clean sheets. This will help prevent infection.
- Pack your bags if you have not already.

### “What to Bring” checklist:

1. A great attitude. You are on your way back to an active lifestyle!
2. This journey guide
3. Phone numbers of anyone you may want to contact during your stay in the hospital
4. An accurate medication list
5. Your insurance card
6. A photo ID
7. A prescription card, if you have one through your insurance company
8. An outfit to wear while at the hospital in case you end up staying the night; bring loose-fitting clothing such as T-shirts or button-up shirts. There are specialized shoulder surgery shirts available for purchase online if you are interested
9. Clothing to layer in case you get cold
10. Comfortable walking shoes and socks
11. CPAP machine for sleep apnea, if you use one at home

Please do NOT bring:

- Jewelry
- Valuables such as credit cards, checks, or large amounts of money
- Medications – your UT Southwestern care team will give you all necessary medications while you are in the hospital; if there is a special medication that you are concerned will not be available to you, please discuss this with your care team member
Day of Surgery

Please review the following information to help ensure a safe and successful surgery.

**Surgical Location**

- Texas Health Frisco
  12400 Dallas Parkway
  Frisco, TX 75033

- Arrive two hours before your scheduled surgery (or when advised by the surgical team). Complimentary valet parking is available for patients and visitors starting at 7 a.m.

- Check in on the first floor; you will be escorted to the presurgery area.

- Bring an accurate, current list of medications you are taking.

- In the presurgery area,

we will review your medical history and medications and start an IV in your arm. The anesthesiologist will discuss an anesthesia plan with you.

- Members of the orthopaedic surgery team will review the surgical plan with you and mark your surgical site. You will be given medication for comfort and antibiotics prior to surgery through an IV.

- Family/friends/your personal champion may stay in the presurgery room until surgery.

Reminder: Stop drinking all liquids after midnight the night before your surgery. Do not take any blood pressure medications that end with –pril or –sartan the morning of surgery. You may take any other blood pressure medications the morning of surgery, such as metoprolol, hydrochlorothiazide (HCTZ), or clonidine.
What to Expect While You’re in the Hospital

We want to make your stay as comfortable and safe as possible. Here’s what to expect.
A Word About Medications

We will use a combination of narcotic and non-narcotic medications to safely minimize your discomfort after surgery. Be open to trying this regimen; you will be pleasantly surprised how well it works. Narcotic medications may have side effects, including nausea, vomiting, itching, drowsiness, constipation, and hallucinations, that can impede your recovery.

We will work with you to decrease your risk of addiction and abuse. The risk can be managed if the medications are used properly for a short period of time and for the right reasons. Use of the ice machine and non-narcotic medications can decrease the number of stronger medications used, which will reduce the risk of side effects. Our goal is to create a smooth, safe, comfortable recovery for you while reducing complications.

Nerve Block

Prior to your surgery, a member of the anesthesia team will discuss doing a nerve block to numb your operative arm. This is a routine procedure that helps with postoperative pain. A numbing medication is injected into the side of your neck, just above your shoulder, using ultrasound. If you are a candidate, this will be done shortly before your surgery.

Pain Management

Your orthopaedics team will work with you to manage your pain after surgery. You will need to notify us if your pain starts to feel unmanageable. Please note that no pain medication will be scheduled. You will use a pain scale as a guide to ask for medication based on how you feel. We will strive to give you enough pain medication to keep you moving without leaving you feeling nauseated or sleepy. Using the ice machine or applying ice bags several times a day is the best way to feel better and not require as many narcotic medications. If using ice bags, ensure there is a barrier (towel, shirt, or pillowcase) between the ice and your skin to avoid burning yourself.

Postsurgical Movement and Activity

Moving as soon as possible after surgery has been proved to enhance outcomes and minimize complications after surgery. Movement helps your circulation, breathing, and digestion. Movement will also reduce the risk of a blood clot (or deep vein thrombosis) and will open up your lungs to prevent pneumonia and postoperative fevers.

Your safety and fall prevention are priorities, so please do not get out of bed without assistance from our team.
Pneumonia Prevention

A member of the nursing team will bring a breathing device called an incentive spirometer to your room and teach you how to use it. This is to improve the movement of air in your lungs. Getting out of bed to walk and using a spirometer will help you take deeper breaths and increase airflow to the lungs. Spirometry also helps with postoperative fevers, so please use as directed by your spirometry team.

Nutritional Needs/Gastrointestinal Issues

Some people may experience an upset stomach after surgery due to anesthesia and pain medication. You will have anti-nausea medication available after surgery; please notify the nurse if you need this medication. Eating small meals and taking frequent sips of water will help with nausea and dehydration.

Some people may experience constipation because of anesthesia, pain medication, and a lack of activity. We will be sending you home with a prescription of senna-docusate to take on an as-needed basis. We encourage you to be up – out of bed and moving around – several times a day to help prevent constipation.

Length of Stay

Although it is common to go home the day of surgery, you will have to successfully meet a few requirements before you
are released. You will need to have your pain controlled on oral medications, and you must be approved to go home by the surgeon. This means you must be able to get in/out of bed and walk to the bathroom. Please note that the length of stay in the hospital varies for individual patients and their type of surgery.
Are you ready to leave the hospital?
Since the beginning of your journey, the team has been working with you through your preoperative care, surgery, and now, your discharge home and rehabilitation. Our goal is to relieve your pain and get you back to the activities you enjoy. That requires active involvement on your part.

Throughout your stay, we have monitored your progress, your strength and endurance abilities, and all the resources required for your safe recovery.

Once you have met all discharge requirements, pain medications for home will be filled by the UTSW concierge pharmacy and delivered to your room.

### Review Your Discharge Instructions

A nurse will review your After Visit Summary prior to you leaving the hospital. This packet includes essential information on how to take care of your surgical dressing, activity restrictions, dates for follow-up appointments, and information on the importance of ice. Please ask questions, so you understand what is expected of you. Please read through all discharge instructions included in the After Visit Summary and contact our office if you have any questions. Your nurse at discharge will also go over your discharge medications and review your home medications.

### Let Us Know Where You Are Going for Physical Therapy

For the best outcome after surgery, we recommend most patients start physical therapy within two weeks after surgery. Your health care team will advise you of any changes in this timing. Inform us where you will be going to physical therapy, so we can fax your orders and instructions to the correct location.

### Leaving the Hospital

Once ready, you will be transported by wheelchair to the patient pickup area. Be sure to gather all your belongings.
At-Home Checklist

Your surgical dressing may be removed 48 hours after the procedure. Leave the tape strips in place; they may fall off on their own within two weeks. If they are still in place during your first appointment after surgery, they will be removed at that time. If you have staples, they will be removed at your two-week post-op appointment. Here are other things to do and not do at home after your surgery:

**Do**

- Ice your shoulder at least four or five times per day. Be sure to place a towel between your skin and the ice pack to prevent burns.
- If you purchased an ice machine, you may keep your pad on for most of the day. After a few days, you can use it four or five times a day, 20-30 minutes at a time.
- Take a shower after removing your bulky dressing 48 hours after surgery. Let water run over the incision/tape strips, but do not scrub the incision.
- Take your pain medications. We recommend you schedule them around the clock while your arm is still numb from the nerve block, so that you are not hit with an increase of unexpected pain when the block wears off. After the block wears off, you may take the medication as needed.
- Take a stool softener while you are using pain medication.
- Wear your sling for sleep and/or in the presence of uncontrolled crowds, kids, or pets.
- Begin using your arm in front of your body, unless you are told otherwise by your surgeon.
- Use MyChart to communicate with the staff for nonemergencies only. Any issue that needs immediate attention requires a phone call to the ortho clinic, 469-604-9070.
- Ensure you have enough tablets of pain medication prior to the start of the weekend. Any refills should be requested no later than Thursday to ensure they are filled for the weekend.

**Do Not**

- Soak in bathtubs or hot tubs or get in any bodies of water such as pools, rivers, lakes, or the ocean until six weeks after surgery.
- Use any lotions, alcohol, oils, or ointments on your incisions for at least six weeks after surgery.
- Lift anything heavier than 1-2 pounds with your operative arm.
- Place your arm behind your back until you are told it is safe to do so by your health care provider.
- Consume alcoholic drinks until you get your surgeon’s approval at your follow-up appointment.
**Staying Healthy**

**Eat Healthily**

Eat a balanced and healthy diet and manage your weight.

**Stay Smoke-Free**

Being smoke-free means you care about practicing preventive medicine. Also, try to avoid environments where there is smoking. Secondhand smoke can increase your risk of poor healing and infection.

**Live a Healthy Lifestyle**

You can maintain better health by being aware of certain aspects of your body. Proper blood pressure, glucose levels, cholesterol, and weight are necessary to maintain a healthy body. This commitment to ensuring your body is healthy should be lifelong and not just during the period of your surgery. Improve your overall health by getting checkups regularly to live your best life at any age.

**Mention Dental Appointments or Upcoming Surgeries**

If you have any other surgery or dental appointments approaching, remember to tell your doctor or dentist that you have had recent joint replacement surgery. You and your physician will discuss the need for antibiotic treatment before the appointment or procedure to prevent a possible infection. This applies to routine dental cleanings. It’s also important to maintain good dental hygiene.

**Reasons to call your surgeon’s office after surgery:**

- Fever above 100 F that lasts longer than 24 hours
- Increased swelling, redness, or warmth from your incision
- An odor or discharge from your incision
- Excessive bleeding from your incision
- Sudden shortness of breath or chest pain
- Inability to reestablish normal bowel habits despite increasing fluid intake
- Uncontrollable pain not relieved by ice and pain medication

**Schedule of follow-up visits:**

- Two weeks with X-ray
- Six weeks
- 12 weeks (three months) with X-ray
- Six months with X-ray
- One year with X-ray
- Every year thereafter for annual X-rays
Once you are cleared by your surgeon, try to exercise regularly, three to four times per week, 20 to 30 minutes at a time. This commitment will allow you to maintain your strength, balance, and, especially, good posture. Proper mechanics and posture will help your joint to function in a smooth and pain-free manner. Try to do a variety of exercises, including weightlifting, body-weight exercises that use your own weight to provide resistance against gravity, and aerobics (walking, biking, swimming).

FAQ

How long will I have to wear the sling after surgery?
You will wear the sling six weeks for sleeping and when you are out and about in crowds. You do not need to wear it while relaxing around the house, unless you are told otherwise by one of the providers.

How long will I be in the hospital?
Most patients go home the day of surgery.

When can I drive?
You may drive when you are able to lift your arms to shoulder level and are not taking pain medication during the day. This is typically six weeks after surgery and around the time you are done wearing your sling.

When can I return to work?
If you have a desk job, you may return to work whenever you like. You will have to follow lifting restrictions (no greater than 1-2 pounds). If you have a job that involves physical labor and are not able to temporarily move to light duty, you will not be able to go back for three months or longer, depending on what your job entails.

When will I start physical therapy?
Most patients begin physical therapy within a week or two following surgery. The goal is to start physical therapy prior to your first follow-up appointment at two weeks. Depending on your surgery, your PT may be delayed six weeks to allow your shoulder to begin healing.

Exercise to Keep Your Body Strong

Once you are cleared by your surgeon, try to exercise regularly, three to four times per week, 20 to 30 minutes at a time. This commitment will allow you to maintain your strength, balance, and, especially, good posture. Proper mechanics and posture will help your joint to function in a smooth and pain-free manner. Try to do a variety of exercises, including weightlifting, body-weight exercises that use your own weight to provide resistance against gravity, and aerobics (walking, biking, swimming).
Important Phone Numbers

- UT Southwestern Orthopaedic Surgery Clinic – Frisco:
  - Outpatient Therapy Center: 469-604-9070
  - fax 469-604-9071

- Texas Health Frisco:
  - Guest and Patient Services 469-604-9294
  - PAT Department 469-495-2180
  - Ortho Program Coordinator 469-495-2131
  - CT Scheduling 469-495-1099

- Texas Health Hospital Financial Counseling 877-773-2368

- Texas Health Hospital Financial Counseling:
  877-773-2368

- Anesthesia Financial Counseling: 877-361-1809

- Tobacco Cessation Program: 214-761-3139

- UT Southwestern Center for Human Nutrition: 214-648-2890

- Anesthesia nerve block team: 1-888-339-USAP (8727)