



Please bring this booklet with you to ALL of your appointments.

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The information provided in this booklet is for educational purposes. It does not replace the advice or specific instructions from your doctor, nurse, or other healthcare provider. Do not use this information to diagnose or treat. If you have questions about your own care, please speak with your healthcare provider.

English: This information is important! If you have trouble reading this, ask someone to help you.

Italian: Queste informazioni sono importanti! Se ha difficoltà a leggere questo, chiedi aiuto a qualcuno.

Spanish: ¡Esta información es importante! Si tiene dificultad en leer esto, pida que alguien le ayude.

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INTRODUCTION

Thank you for choosing Humber River Health for your upcoming surgery. You and your surgeon have decided to proceed with joint replacement surgery. You have now taken the first step toward returning to your daily routine and the activities you have enjoyed in the past.

In this package, you will learn what shoulder replacement surgery is and what to expect before, during, and after the surgery. The appendices at the end of the booklet have key resources that you can refer to for more information.

About the Bundled Care Pathway for Shoulder Replacement Surgery

The Ontario Ministry of Health and Long-Term Care has introduced new care plans, called **Bundled Care Pathways**, for all patients having shoulder replacement surgery.

These plans are quite different from what you might have experienced or heard of in the past. The Bundled Care Pathway coordinates the care that you will receive throughout your shoulder replacement surgery journey. This new care pathway includes your pre-surgical visit, your surgery, and physiotherapy services after surgery. The goal of this pathway is to help you transition more smoothly out of the hospital and into your home, where you can recover as quickly and as safely as possible.

Members of the Healthcare Team

Throughout the pathway, you will be meeting and working with some or all of the members of the health care team listed in the diagram. We are here to support you and your family and address your questions or concerns. Please feel free to speak to members of your healthcare team or your surgeon.

There are many education resources available to help prepare yourself and your home before surgery. You will also have a chance to ask any questions during your surgical pre-screening visit. After your surgery, you and your care team will work together to assess and review your stay in the hospital and your need for outpatient physiotherapy services after you leave.



For questions or concerns, I can contact:

My Surgeon: _____ Tel: _____

Address: _____

My Orthopedic Care Navigator: _____ Tel: (416) 242-1000 ext. 41132

Surgical Pre-Screening Department, Humber River Health Tel: (416) 242-1000 ext. 23200

Preparing for Surgery and Discharge as a Bundled Care Patient

To achieve the best results from your surgery, it is very important that you actively plan and prepare for your surgery, and take part in your recovery.

1

Prepare for your Surgery.

BEFORE your surgery date:

- Choose the rehabilitation clinic or provider** you would like to receive your physiotherapy services from.
- Pre-book your physiotherapy appointments** before your surgery. You will need to start attending physiotherapy 3 to 5 weeks after surgery, or on the date your surgeon advises you to start.
- Give the name and contact information of the rehabilitation clinic or provider you have selected to the orthopedic care navigator.** A member of your care team may call you at home to confirm this information.

Physiotherapy services are available from Humber River Health.

Outpatient Rehabilitation, Humber River Health

1235 Wilson Ave., 14E Floor, Toronto, Ontario M3M 0B2

Tel: (416) 242-1000 ext. 46033 / Fax: (416) 242-1125

If you cannot go to Humber River Health for outpatient physiotherapy, please speak to the Orthopedic Care Navigator or your healthcare provider for other outpatient physiotherapy locations.

2

Prepare for Discharge from the Hospital:

Expect to go home **1 day after** your shoulder replacement surgery. **Before you leave the hospital, you must:**

- Have a discharge plan in place, which should include assistance in your home or a family or friend's home, or assistance in a short-stay bed in a retirement home (see **Appendix A. Home Care Support Services (Private)**, p. 39) and **Appendix B. Short Stay Respite Options (Private)**, p. 42).
- Have arranged for someone to pick you up and drive you home from the hospital.
- Have your rehabilitation clinic appointments already booked.

If you need help getting to your rehabilitation clinic appointments, we have provided a list of transportation options you can choose from for a fee (see **Appendix C. Transportation Options**, p. 43).

3

Participate in your Recovery:

Physiotherapy is an important part of your recovery. We will give you physiotherapy exercises to do at home (see **Appendix E. Home Exercise Program**, p. 47). You will also need to attend physiotherapy classes at a rehabilitation clinic starting 3 to 5 weeks after your surgery date, or when your surgeon advises.

After your surgery, we will provide you with the following documents addressed to "Publicly-Funded Rehabilitation Care Providers". **At your first appointment, please give the rehabilitation clinic/provider you have chosen these documents:**

- Rehabilitation Commencement Letter
- Rehabilitation Completion Letter




THE CARE PATHWAY - A SUMMARY

These 5 tables summarize the **Care Pathway** that you will follow for your shoulder replacement surgery, and what you can expect at each stage.

WHAT TO EXPECT	WITHIN 30 DAYS BEFORE SURGERY
	SURGICAL PRE-SCREENING (p. 14)
How to Prepare	<input type="checkbox"/> You do not need to fast for this pre-surgical appointment, unless your surgeon has told you to do so <input type="checkbox"/> Please bring all the medicine you are currently taking, in their original packaging, to the appointment
Tests	We will do diagnostic tests that your surgeon has requested.
Medicines	We will: <ul style="list-style-type: none"> • Check all the medicines you are currently taking
Activity	We will talk with you about starting: <ul style="list-style-type: none"> • The home exercise program (p. 47) • The deep breathing, coughing, and ankle pumping exercises (p. 33) Start to: <ul style="list-style-type: none"> <input type="checkbox"/> Prepare your home <input type="checkbox"/> Arrange care at home <input type="checkbox"/> Consider your equipment needs <input type="checkbox"/> Prepare and freeze meals that you can warm up and eat during your recovery
Education and Discharge Planning	We will review with you: <ul style="list-style-type: none"> • The information in this booklet • How to use the chlorhexidine scrub, if instructed by your surgeon Make sure you: <ul style="list-style-type: none"> <input type="checkbox"/> Have arranged physiotherapy services for 3 to 5 weeks after your surgery

WHAT TO EXPECT	MORNING OF SURGERY	YOUR SURGERY	AFTER SURGERY - IN RECOVERY
	PRE-OP DEPARTMENT		POST-ANESTHETIC CARE UNIT (PACU)
How to Prepare	<input type="checkbox"/> Follow the fasting guidelines to ensure your stomach is empty for surgery (p. 23): <ul style="list-style-type: none"> • Midnight before surgery, NO food, drink, candy, or gum <ul style="list-style-type: none"> » ONLY water, Gastrolyte®, Hydralyte®, Pedialyte®, Gatorade®, and/or a drink your doctor may prescribe are allowed up until 4 hours before surgery. • 4 hours before surgery, NOTHING to eat, chew, or drink <input type="checkbox"/> Bring your assistive aids (if applicable) to the hospital		
Tests	We will do: <ul style="list-style-type: none"> • Blood tests, as needed 		We will do: <ul style="list-style-type: none"> • Blood tests, as needed • X-rays of your shoulder, as needed
Treatments	We will: <ul style="list-style-type: none"> • Insert an intravenous (IV) line The anesthesia doctor might also insert a catheter near the surgical area that will help to reduce your pain during your recovery.		We will: <ul style="list-style-type: none"> • Give medicines and fluids through the IV • Check your dressing • Check your pain level • Give oxygen, as needed
Medicines	We will give you: <ul style="list-style-type: none"> • A peripheral nerve block • Pain medicine to take by mouth 		We will give you: <ul style="list-style-type: none"> • Pain medicine through the IV
Activity			<input type="checkbox"/> Start deep breathing, coughing, ankle pumping exercises (p. 33)
Nutrition	<input type="checkbox"/> Follow the fasting guidelines (see "How to Prepare" above)		<input type="checkbox"/> After surgery, you will start with clear fluids only
Education and Discharge Planning	We will review with you: <ul style="list-style-type: none"> • What to expect before, during, and after surgery • How to manage your pain (p. 27) • How to prevent post-surgery complications (p. 12) 		We will review with you: <ul style="list-style-type: none"> • Breathing, coughing, and ankle pumping exercises (p. 33)

WHAT TO EXPECT	AFTER SURGERY - DURING YOUR HOSPITAL STAY	
	SURGICAL INPATIENT UNIT	
Treatments	We will: <ul style="list-style-type: none"> • Saline lock your IV once you are drinking well • Check your dressing and pain level • Ensure your sling is on properly 	
Medicines	Through the IV, we may give you: <ul style="list-style-type: none"> • Medicine to reduce inflammation • Antibiotics to prevent infections • IV pain medicine until you are able to take pain medicine by mouth (oral) and local nerve block 	By mouth, we may give you: <ul style="list-style-type: none"> • Medicine for pain • Any of your regular medicines
Activity	<input type="checkbox"/> Continue deep breathing, coughing, and ankle pumping exercises (p. 33) <input type="checkbox"/> The physiotherapist will do a gait and stair assessment, and review hand, elbow and shoulder exercises with you	
Nutrition	<input type="checkbox"/> You can resume your regular diet, as your nurse instructs	
Elimination	<input type="checkbox"/> If you feel the need to use the bathroom, call your nurse for assistance	
Education and Discharge Planning	We will review with you: <ul style="list-style-type: none"> • Ways to manage your pain at home (p. 27) • Steps to care for your dressing and incision (p. 30) • Prescription medicine to take, as instructed by your surgeon • Any follow-up appointments with surgeon in the Fracture Clinic (p. 38) • Signs to look for when you need to go to ER (p. 38) The physiotherapist will also: <ul style="list-style-type: none"> • Review the home exercise program (p. 47) 	

WHAT TO EXPECT	AFTER SURGERY - AT HOME	
	ACTIVITY/EXERCISES See <i>Appendix E. Home Exercise Program</i> (p. 47)	CARE AT HOME INSTRUCTIONS
Week 1	<p>START:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Finger and wrist exercises <input type="checkbox"/> Active/assisted elbow flexion and extension, as you are able <input type="checkbox"/> Shoulder girdle exercises and postural awareness <p> CAUTION:</p> <ul style="list-style-type: none"> <input type="checkbox"/> DO NOT lift items heavier than a coffee cup 	<ul style="list-style-type: none"> <input type="checkbox"/> Wear the sling <input type="checkbox"/> Keep your armpit clean <input type="checkbox"/> Manage your pain using non-medicine and medicine methods <input type="checkbox"/> You may sleep facing up or propped up in a partially reclined position, with a pillow underneath your operated shoulder and elbow for support
Week 2	<p>CONTINUE:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Your week 1 activity/exercises <p>START:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Gentle pendular swinging in a forward leaning position <input type="checkbox"/> Scapular setting exercises <p> CAUTION:</p> <ul style="list-style-type: none"> <input type="checkbox"/> DO NOT force any movements. Exercise within your pain limit <input type="checkbox"/> DO NOT do external rotation more than 30 degrees for 3 weeks after surgery 	<ul style="list-style-type: none"> <input type="checkbox"/> Continue to wear the sling. You may remove it to shower (p. 34) <input type="checkbox"/> Continue your week 1 "Care at Home instructions"
Weeks 3 to 5	<p>CONTINUE:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Your weeks 1 and 2 activity/exercises <input type="checkbox"/> Stretching regularly throughout the day to maintain good range of motion (ROM) in your elbow, wrist, and hand <p>START:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Outpatient physiotherapy at your chosen rehabilitation clinic or provider <input type="checkbox"/> Passive and active-assisted ROM on your shoulder <p> CAUTION:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Slowly increase the use of your arm every day, but avoid painful activities <input type="checkbox"/> DO NOT force any movements. Exercise within your pain limits 	<ul style="list-style-type: none"> <input type="checkbox"/> You may start to wean off from wearing the sling, as directed by your surgeon and as you feel comfortable, but always wear your sling when outdoors or in crowds <input type="checkbox"/> Continue your weeks 1 and 2 "Care at Home instructions"

WHAT TO EXPECT	AFTER SURGERY - AT HOME	
	ACTIVITY/EXERCISES See Appendix E. Home Exercise Program (p. 47)	CARE AT HOME INSTRUCTIONS
Weeks 5 to 6	<p>CONTINUE:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Scapular setting exercises <input type="checkbox"/> Stretches increasing ROM in all directions <p>START:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Active ROM on your shoulder <input type="checkbox"/> To use your arm and hand as fully and normally as possible, in comfortable positions 	
Weeks 6 to 8	<p>CONTINUE:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Scapular setting exercises <input type="checkbox"/> Active ROM on your shoulder <p>START:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Gentle strengthening exercises, within your pain limit, if your surgeon says it is okay 	

SECTION 1. ABOUT SHOULDER REPLACEMENT SURGERY

Understanding the Shoulder

Your shoulder is made up of 3 bones - your upper arm bone (humerus), your shoulder blade (scapula), and your collarbone (clavicle) (Figure 1).

The head of your upper arm bone fits into a rounded socket in your shoulder blade. This socket is called the "glenoid."

A combination of muscles and tendons (tissues) keeps your arm bone centred in your shoulder socket. These tissues are called the "rotator cuff."

What is shoulder replacement surgery?

Shoulder replacement surgery is done to treat arthritis of the shoulder joint (gleno-humeral). The type of prosthesis we use will depend on how damaged the rotator cuff tissues are.

In an **anatomical** shoulder replacement surgery, we replace the head of the humerus and the glenoid. We fit a plastic "cup" into the glenoid, and attach a metal "ball" to the top of the humerus. This replicates the normal boney anatomy of the shoulder (Figure 2).

In a **reverse** total shoulder replacement, we place the plastic cup and metal ball opposite to the positions in an anatomical shoulder replacement surgery. We fit plastic cup to the top of the humerus and attach the metal ball to the glenoid (Figure 3). This type of shoulder replacement surgery works better for people with large rotator cuff tears that cannot be repaired. This surgery allows the body to rely on the muscles of the chest to move the arm.

Figure 1. **A normal shoulder joint.**

Source: [Isolated Vectors by Vecteezy](#)

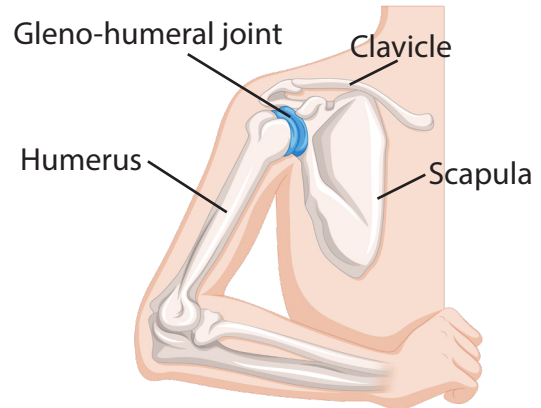


Figure 2. **Anatomical shoulder replacement surgery.**

Source: [Isolated Vectors by Vecteezy](#) and [Smart Servier Medical Art](#)

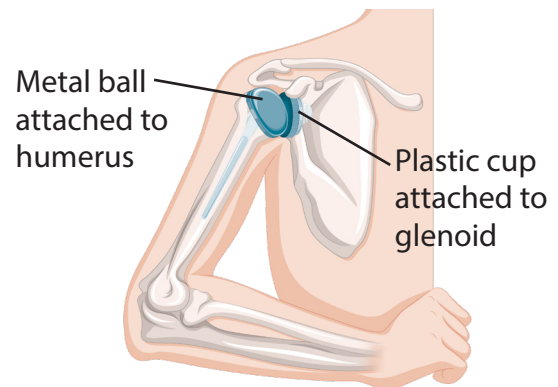
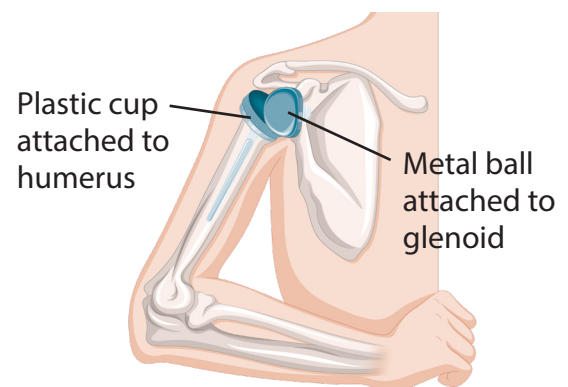


Figure 3. **Reverse total shoulder replacement surgery.**

Source: [Isolated Vectors by Vecteezy](#) and [Smart Servier Medical Art](#)



What are possible risks or complications from this surgery?

Allergies: Tell your surgeon or surgical team if you have any allergies.

Signs and symptoms of an **allergy**:

- Itchiness
- Hives
- Rash

If you experience any of these symptoms after your surgery, please tell your nurse or doctor right away.



Anemia (low red blood cells): Less than 5% of patients need a blood transfusion to treat anemia during the first 48 hours after surgery. We have many ways to reduce blood loss and build up your ability to produce new blood. If your doctor thinks you may need a blood transfusion, he/she will discuss this with you. In Ontario, there is a rigorous testing program to ensure the safety of donated blood.

Bleeding:

Signs and symptoms of **unusual bleeding**:

- Increased bleeding at the surgical wound
- Nosebleed, blood in urine, blood with a bowel movement, blood from the vagina, anus or gums.

If you experience any of these symptoms after your surgery, please tell your nurse or doctor right away.



Complications from anesthesia:

Temporary confusion can happen after surgery. We take measures to reduce the chances of this happening. Your anesthesiologist will discuss this with you in more detail at your Surgical Pre-Screening Clinic appointment before surgery. Pneumonia, heart attack and stroke rarely happen. Pre-operative testing and assessment by the anesthesiologist can reduce these serious events.

Deep Vein Thrombosis and Pulmonary Embolism (Blood Clots):

Deep vein thrombosis is when blood clots (blood that hardens into clumps) form in the large veins (blood vessels) of the leg. If these clots break apart and travel to the lungs, this can cause a **pulmonary embolism**.

Signs and symptoms of **deep vein thrombosis**:

- Pain or tenderness in the leg
- Swelling of the leg
- Skin is warm to the touch
- Redness of the skin

If you experience any of these symptoms, please seek medical assistance right away.



Signs and symptoms of **pulmonary embolism**:

- Shortness of breath
- Pain in the chest
- Feeling faint
- Coughing up blood
- Heart palpitations

If you experience any of these symptoms, please seek medical assistance right away.



We usually treat these clots with medicine to thin the blood until the clots break down. However, the risk of getting a clot after a shoulder replacement surgery is very low, so you will most likely not need this medicine.

The most effective way to prevent blood clots is by getting up and moving as soon as possible after your surgery, and taking the recommended medicines after your procedure.

You can also perform ankle pumping (p. 33).

Dislocation (the ball comes out of the socket): This happens to about 1% of all patients.

Infection: Occurs in about 1% of patients. To prevent infection, we will give you antibiotics before and after your surgery.

Neurovascular Injury: Injury to a nerve that controls the muscles or a blood vessel happens to less than 1% of all patients. It is common to have a small patch of skin numbness below the incision that will not affect your physical function.

Periprosthetic Fracturing (bone fracture near the artificial joint): A fracture can happen when rigid metal components fit into softer bone or the soft tissue around the shoulder. This does not happen often. If this happens during surgery, we will stabilize the implant and bone further.

Pneumonia: Pneumonia is an infection in your lungs. To reduce your risk of pneumonia after surgery, it is important to change positions in your bed, sit up, stand up and get moving as much as possible.

Patients who smoke are at a higher risk of developing lung problems, such as a lung infection. We encourage you to quit smoking before your surgery. If you smoke, it will take you longer to recover from surgery, even if it is only one cigarette a day. Please talk to your family doctor for ways to quit smoking.

Stiffness: After surgery, you will have to restrict your shoulder and arm movements, so you may have stiffness in your shoulder or arm. Your home exercises and physiotherapy sessions will help you return to a pain-free shoulder and a range of motion that will allow you to get back to your activities of daily living.

SECTION 2. PREPARING FOR SURGERY

Which appointments do I need to attend before my surgery?

There are 3 appointments to attend before you can have your surgery:

1. Surgical Pre-Screening Appointment (with an Advanced Practice Physiotherapist appointment) **mandatory*
2. Internal Medicine Appointment (if needed)
3. ONTRAC Appointment(s) (if needed)

Please note:
There may be additional appointments you need to attend before your surgery.

1 Surgical Pre-Screening Appointment **mandatory*

Surgical Pre-Screening is a clinic at Humber River Health. At this appointment, you will meet with the inter-professional team involved in your care, and get tests to make sure you are medically fit for surgery.

My Surgical Pre-Screening Appointment



You must attend this appointment within the 30 days before your surgery. Your surgeon's office will help you schedule this appointment. Please note: If you already attended your Pre-Screening appointment, but your surgery was moved to a date more than 30 days after that visit, you will need to attend another Pre-Screening appointment closer to your new surgery date.

Date: _____

Time: _____

Location: Medical/Surgical Clinics, Humber River Health
Level 4, 1235 Wilson Ave. Toronto, Ont. M3M 0B2

Park in the East Parkade and enter from the East or Portal A entrances. Take the East Outpatient Elevators to Level 4.

Please bring the following to your Pre-Screening visit:



- Your health card (and a photo ID)
 - All your medicines in their original bottles, including herbal medicines and vitamins
 - Any health records that your surgeon's office has given you.
 - Water and snacks
- Your Pre-Screening visit is very thorough and can be 4 to 5 hours long.
 - You do not need to fast for this appointment, unless your surgeon has told you to do so.

You may meet with the following team members at your Pre-Screening appointment:

- **Nurse:** The nurse will go over your medical history and the medicines you are currently taking. The nurse will also go over what you can expect on the day of your surgery and how to prepare for your discharge. They may also review some exercises for after your surgery, including deep breathing and coughing.
- **Anesthesiologist:** An anesthesiologist is a doctor who is specially trained to give anesthesia (a drug that makes you drowsy or puts you to sleep) or spinal medicine (a drug that freezes a local area). We will discuss the best options for you regarding the use of an anesthetic or spinal medicine during surgery. Also, you will go over options to manage pain that you can use after your surgery.

Please let the anesthesiologist know if you have any neurological conditions (for example, myasthenia gravis). Your doctor must know this to select the proper medicines for your surgery and recovery.



- **Radiology Technician:** We will take x-rays of you at your Pre-Screening appointment. Even if you have already had old x-rays done, we will need to have another set of x-rays for the day of your surgery. Your surgeon will use these x-rays to measure you for your new joint implant, and make sure nothing has changed. The radiology technician will perform the x-rays your surgeon has ordered.
- **Laboratory Technician:** This person will draw your blood for blood tests. If your doctor has ordered it, they may also perform an electrocardiogram (ECG) of your heart, which tests if you are fit enough for surgery.
- **Social Worker:** If you live alone or have concerns about how you will be able to care for yourself at home after your surgery, you may ask to speak to a social worker at your Pre-Screening appointment. They will help you in your discharge plans. The social worker can help offer sound advice, counselling, and resources for you.
- **Advanced Practice Physiotherapist:** The physiotherapist will give you education to help you prepare for your surgery and inform you of what you need to do to return to your regular activities. They will review exercises, movement precautions, and sling use. The physiotherapist will also help identify where you will be attending your outpatient physiotherapy.
- **Pharmacist:** Please ask to speak to a pharmacist if you have any questions and/or concerns about your medicines or how they may interact with the new ones your surgeon will prescribe to you after surgery.
- **Orthopedic Care Navigator:** The orthopedic care navigator will help coordinate care and provide information and emotional support along your journey.

2 Internal Medicine Appointment (if needed)

If you have any underlying health problems or need general clearance to undergo surgery, we may ask you to see an internal medicine specialist. This medical specialist will go over your health history and may perform certain tests to ensure that you are as healthy as you can be before your surgery.

My Internal Medicine Appointment



If needed, you must attend this appointment before your Pre-Screening appointment. Your surgeon's office will arrange this appointment and provide you with the details.

Dr. _____

Date: _____ Time: _____

Address: _____

Tel: _____

Please bring the following to your Internal Medicine visit:



- Your health card (and a photo ID)
- All your medicines in their original bottles, including herbal medicines and vitamins
- Any health records that your surgeon's office has given you.

3 ONTRAC Appointments (if needed)

ONTRAC is a program at the Humber River Health that focuses on boosting your hemoglobin (blood) levels before your shoulder replacement surgery. Hemoglobin is an important part to your blood as it carries the oxygen around your body.

My ONTRAC Appointment (with the Blood Conservation Coordinator)



If needed, a nurse from Humber River Health will contact you to schedule an appointment with you.

Dr. _____

Date: _____ **Time:** _____

Address: _____

Tel: _____

Please bring the following to your ONTRAC visit:



- Your health card (and a photo ID)
- All your medicines in their original bottles, including herbal medicines and vitamins
- Any health records that your surgeon's office has given you.

With any surgery, there is some blood loss, but it is usually minimal. However, there is always the potential of needing a blood transfusion. The ONTRAC program will help reduce your chances of a blood transfusion. Although it is a voluntary program, we highly recommend you attend this appointment.

At this appointment, we will do a blood test and a nurse will discuss the findings with you. If your hemoglobin is low, the ONTRAC nurse will develop a treatment plan that you will follow to help raise your hemoglobin levels before your surgery. This will help you to avoid having a blood transfusion while in hospital.

This plan may include increasing your intake of foods high in iron and B12 (see **Appendix F. Iron-Rich Diet**, p. 50). We may also schedule you to meet with a hematologist (a doctor specializing in blood health) to discuss other options that will help increase your hemoglobin levels before surgery.

Did you know?

Humber River Health has one of the lowest transfusion rates across the province because this ONTRAC program has reduced our patients need for inpatient blood transfusions after surgery.

Which assistive devices/aids will I need?

You will learn about these devices/aids during your Pre-Screening appointment with the Advanced Practice Physiotherapist.



Assistive Devices Checklist

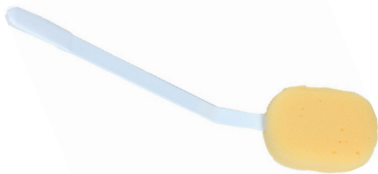
- Arm sling



We will provide you with the sling at the time of surgery.

If you would like to buy your own specialized sling before your surgery, please speak to your surgeon.

- Long-handled sponge



- Hand-held showerhead



- Shower transfer bench/shower chair



- Oversized button-down shirt



For a list of vendors, please see **Appendix D. Healthcare Equipment Stores**, p. 45.

You are responsible to get the recommended equipment before coming for your surgery.

What type of support should I arrange now to help me during my recovery?

Family/Friend Support:

If you live alone, please make sure to find a friend or family member who will be able to stay with you during your recovery. For the first few weeks after you return home from surgery, you will need someone to help you with daily activities (such as showering, dressing, meal prep, cooking, grocery shopping, laundry and cleaning), childcare and pet care help.

If you would like to hire these services privately, please refer to **Appendix A. Home Care Support Services (Private)** (p. 39) for a list of Home Care companies.

Alternative accommodation and community services:

Some patients may choose to stay in a respite care facility after their shoulder surgery. Respite care in a retirement home may give you access to all or some of the following:

- A fully furnished room
- In room emergency bell system
- Meals
- 24/7 assistance from qualified staff, and
- Help with bathing and dressing.

Please note that there is a charge for these services (not covered by OHIP) from \$100 to \$150 per day. If you decide to buy respite care, you must arrange this care before your surgery. It is also recommended that you arrange transportation from the respite facility to attend your outpatient physiotherapy appointments to support your recovery.

Before surgery, tell your care team and your surgeon about your plans for respite care. You can find a list of these facilities in **Appendix B. Short Stay Respite Options (Private)** (p. 42).

My Support Plan



WHO CAN I CALL FOR HELP?

Name: _____

Tel: _____

Name: _____

Tel: _____

Name: _____

Tel: _____

Name: _____

Tel: _____

Name: _____

Tel: _____

Name: _____

Tel: _____

Name: _____

Tel: _____

Name: _____

Tel: _____

How do I prepare myself for my surgery?

These 9 checklists have important instructions you must do **BEFORE your surgery**. They will help you get ready for the surgery and ensure a safe recovery at home.

1 Optimize your health

- Maintain a healthy diet:** While you wait for your surgery, eat foods high in protein, vitamin C, zinc, iron, and calcium. These are important for wound healing and your recovery after surgery.
 - Stop smoking at least 2 weeks before your surgery**, if not completely. Smoking constricts your body's blood vessels (tubes that deliver blood from your heart to your body). This slows down and reduces the blood supply to your new joint. By smoking, your body is not able to heal properly, and your recovery will take longer. This can cause serious complications, including risk of infections.
 - Start your physiotherapy exercises before your surgery:** If you are stronger and more prepared beforehand, you will recover faster and more easily.
 - Please see **Appendix E. Home Exercise Program** (p. 47) for exercises to follow. Do these exercises at home, as you feel comfortable. If an activity causes too much pain, then skip that exercise. Do these exercises 3 to 4 times a day, until the date of your surgery.
 - It may also be helpful to find a physiotherapist that can oversee your home-based exercise program. If you need help finding a physiotherapist, please call your surgeon's office.
 - Practice using your non-surgical arm:** While your shoulder is healing, you will only be able to use your non-surgical arm for everyday tasks. Practice using your non-surgical arm for basic self-care activities, such as getting out of a chair, grooming, eating, and going to the bathroom.
 - Manage your pain:** To relieve muscle pain, put a warm or cold pack on your shoulder for 20 minutes, once or twice a day. Make sure that you have a towel or cloth between your skin and the hot/cold source. Check your skin every few minutes to make sure you do not burn yourself.
 - Do not sleep with a heating pad ON.
 - **Do not use a pain relief cream or ointment with your warm or cold pack as this could cause a chemical burn.**
- You may also take pain medicines prescribed by your doctor to help with pain.
- Get necessary dental work (such as cleaning) done 6 weeks or more before your surgery date.** After your surgery, do not get any dental work done within the first 3 months.

2 Optimize your home and arrange for support

Optimize your home:

- Buy any necessary equipment from a medical supply store before surgery, and set them up in your home.
- Store items you use most often in easy-to-reach places.
- Re-arrange your closet and/or dresser so that the clothes you will use most often are within easy reach.
- Make your washroom safer:
 - Place a non-slip bath mat in your tub to prevent slipping.
 - Buy a hand-held shower head/hose, if possible.
 - Buy a shower transfer bench/shower chair, if possible.
- Cook and freeze pre-cut and portioned meals or arrange for grocery delivery service.

Arrange for support:

- Arrange for a family or friend to be available to support you after surgery.
- If you feel you will need more support at home than you will have, set up private home care services (see **Appendix A. Home Care Support Services (Private)**, p. 39) before your surgery.
- Arrange for someone to drive you to and from the hospital.
- Arrange for someone to care for your pets, if needed.
- Arrange for someone to care for your children, if needed.

3 Speak to your surgeon about your discharge plan

- Remember to **confirm your discharge plan with your surgeon** so you know when you are going home.

4 Pack a bag to bring to the hospital

- Any personal toiletries you might need while in Hospital (toothpaste, toothbrush, skin cream, facial tissue, etc.)
- Loose fitting clothing (such as a loose button-down shirt) for physiotherapy and for your return home
- Glasses, hearing aids, dentures and their storage cases labeled with your name
- Personal phone numbers that you may need
- Specialized sling (if you chose to buy one before surgery, otherwise we will give you a sling at the time of your surgery)
- Dressing aids you may need
- Something to read while you are waiting for surgery.

Note: We are not responsible for lost, stolen or damaged valuables. Please leave any valuables at home. We strongly recommend that you have a friend or family member keep your belongings until we transfer you to your room or discharge you home after your surgery. Please label any belongings you bring with your name.

5 Follow the instructions for taking your regular medicines



- You may need to stop some of your regular medicines before surgery. Please follow the instructions that the Surgical Pre-Screening team or your internist has given you.

6 Fill the medicine that your surgeon prescribed

1 week before surgery

- If your surgeon provided you a prescription for medicine to take after your surgery, be sure to **fill it at least 1 week before your surgery**. Otherwise, we will provide you with a prescription on the day of discharge.

7 Do not shave the area of surgery

5 days before surgery

- Do not shave the area of surgery **at least 5 days before surgery**. If needed, your surgeon will shave the area.

8 Follow these fasting guidelines



Starting the night before surgery

Taking food or drink incorrectly before surgery is very dangerous and can lead to vomiting and choking. We may also have to cancel your surgery. Follow these fasting instructions closely.

The midnight before surgery:

- NO food, drink, candy, or gum.
- ONLY water, Gastrolyte®, Hydralyte®, Pedialyte®, Gatorade®, and/or a drink your doctor may prescribe are allowed up until 4 hours before surgery.

4 hours before surgery:

- NOTHING to eat, chew, or drink.
- If your surgeon has instructed you to take your medicines before your surgery, take them with a tiny sip of water only.

If you have diabetes, please follow the specific instructions your doctor gave you regarding eating and drinking before surgery.



9

On the day of surgery

- Remove all nail polish, lipstick and cosmetics before coming to the hospital.
- You may wear partial plates, dentures, hearing aids and contact lenses to the hospital, but you must remove them before going into surgery. Please bring their cases to hospital to store them properly.
- Please let us know if you need an interpreter and we can arrange over-the-phone or video interpretation services on the day of your surgery. We support over 170 languages, including American Sign Language (ASL).

SECTION 3. DAY OF SURGERY

My Surgery



Please arrive 2 hours before your surgery time.

Date: _____

Time: _____

Location: Surgical Department, Humber River Health
1235 Wilson Ave., Level 2, Toronto, Ont. M3M 0B2

Take the Central Elevators to the 2nd floor. Upon exiting the elevator, follow the sign to Surgery Registration to register.

Please bring the following on the day of your surgery:



- Your health card (and a photo ID) and private insurance information
- All your medicines in their original bottles, including herbal medicines and vitamins
- This booklet
- The bag you packed for the hospital (p. 22)

Note: We are not responsible for lost, stolen or damaged valuables. Please leave any valuables at home. We strongly recommend that you have your designated family member or friend keep your belongings until we transfer you to your room or discharge you home after your surgery.

What can I expect on the morning of my surgery?

You may have 1 designated family member or friend with you on the day of your surgery. **Do not bring small children.** You and your designated family member or friend must wear a mask when entering the hospital and keep it on at all times while in the hospital. Ask staff at the Registration desk where your designated family or friend can wait while you are in surgery. The staff can also let them know when your surgery is over.

After registration, a nurse will take you to the change room where you will undress, change into a hospital gown, and remove all your jewelry.

The nurse will then take you to a room where they will check your vital signs (body temperature, blood pressure, breathing rate, heart rate) and go over your medical history to make sure there are no changes. The nurse may also put an intravenous (IV) line into your veins, give you any medicines that the surgeon ordered for you before your surgery, or perform any necessary blood tests.

Following your medical history, you will meet with the anesthesiologist and your surgeon. Your surgeon will mark an "X" on the site of your body we will be operating. If you have any questions or concerns before your surgery, please be sure to ask your doctors at this time.

SECTION 4. AFTER YOUR SURGERY

What happens after surgery?

Your surgery may take about 3 hours. After the surgery, we will take you to the **Post-Anesthetic Care Unit (PACU)** or recovery room. In the recovery room, we will monitor and assess you while you are waking up from the anesthetic. The nurse will check your pain level, blood pressure, heart rate, and temperature. The nurse will also check the circulation and feeling in your arm, as well as any excess bleeding at the surgery site. You will remain in the PACU for at least 1 hour. We will then transfer you to a room in the inpatient surgical unit.

What happens during my hospital stay?

Expect to stay in the hospital for 1 night. On the unit, we will help you:

Manage your Pain: We will continue to check your pain level and give you medicine for pain.

Tell your nurse or doctor if your pain is not well controlled. Ask for pain medicine when you start to have pain. Do not wait until it becomes really bad or intolerable.



Improve your mobility: Following your surgery, our goal is to encourage you to be as mobile as possible to prevent any complications, including any risk of skin breakdown.

- At first, **DO NOT** try to get out of bed without the help of hospital staff. Your nurse will tell you how and when to change your position in bed, get out of bed, and begin walking. You will stand and walk on the day of or day after your surgery.

Go to the washroom: The first time that you get out of bed, we ask that you call your nurse for assistance. Please **DO NOT** attempt to get up on your own.

With personal hygiene: We will encourage you to continue with personal hygiene activities as much as possible to increase your strength and independence. Your nurse will give you a basin with soap and water, along with a facecloth and towel to wash at your bedside. The nurse will assist you as needed, especially for harder to reach areas such as your back.

Start rehabilitation: The day after your surgery, you will start the home exercise program (p. 47). The physiotherapist will also review hand, elbow, and shoulder exercises. This will help you gain greater mobility and ensure an easier recovery following surgery.

You will start outpatient physiotherapy in a clinic in about 3 to 5 weeks after your surgery, as instructed by your surgeon. We highly recommend that you continue your physiotherapy and home exercises for as long as your physiotherapist and/or surgeon has recommended for you.

What happens at discharge?

The clinical team at Humber River Health will work closely with you to make sure that you are fully prepared for discharge from the hospital after your surgery.

Our goal is to help you start making the appropriate arrangements, several weeks before your surgery date. This will help ensure that you have a smooth transition when you leave the hospital following your surgery and be able to start outpatient physiotherapy 3 to 5 weeks after surgery.

Please arrange for a ride home from the hospital on the day of your discharge.



Before we discharge you home, you will be able to:



- Walk short household distances with some amount of supervision initially.
- Understand the plan for managing pain and pain medicines (p. 27).
- Understand your home exercise program (p. 47).
- Understand the supports you need at home.

SECTION 5. CARING FOR YOURSELF AFTER SURGERY

How do I manage my pain?

Pain is a normal symptom after surgery. Although a shoulder replacement is major surgery, our goal is to help make you as comfortable as possible so that you can start your physiotherapy program. Your pain should be controlled enough that you can rest comfortably. It should not prevent you from breathing deeply, coughing, turning, getting out of bed or walking. Together, pain management and physical activity will greatly speed up your recovery process.

Pain Medicine

By the time you leave the hospital, you may only need oral pain medicines to control your pain. Your doctor will prescribe a strong pain medicine (such as a narcotic) to take by mouth.

When taking prescription pain medicine:

- Take this medicine as directed. After 3 to 7 days, take the prescription pain medicine less often, so that you are off them completely within 1 month. If you still feel discomfort after you are off the prescription pain medicine, you may switch to an over-the-counter pain medicine, such as Tylenol®.
- Take pain medicine when you start to have pain. Do not wait until it becomes really bad or intolerable. You may need to take more than one type of pain medicine to manage your pain.
- Take pain medicine 30 to 45 minutes before your physiotherapy sessions. It can take 15 to 30 minutes for it to start working.

You may have some side effects when taking strong pain medicines. Side effects can be controlled or may resolve over time. Let your healthcare provider know if you have any of the following side effects:

- Nausea and vomiting (throwing up) - These 2 are the most common side effects.
- Constipation - This is common. To prevent this, drink plenty of water, eat fruits and vegetables, and exercise. Your doctor may prescribe a stool softener/ stimulant laxative.
- Sleepiness
- Visual or hearing problems
- Lightheadedness or dizziness
- Itching



Continuous Interscalene Nerve Block

Both your surgeon and anesthesiologist may agree that a **continuous interscalene nerve block** is a good way to reduce your pain at home after your shoulder surgery. It can help you feel less pain during and up to 48 hours after the surgery.

The nerve block will stay in place for 3 days after your surgery. Your anesthesiologist will call you every day to make sure the device is working properly and is managing your pain.

You will receive an instruction pamphlet on how to care for yourself while you are on a continuous interscalene nerve block, and how to remove it on day 3 after surgery.

What is a continuous interscalene nerve block?

This nerve block delivers a local anesthetic, or numbing medicine, near the nerves of the neck to “block” pain signals in the shoulder and arm.

The medicine pumps out of a bottle (infuser) and flows through a thin tube (a catheter) into the body. The bottle will deliver the medicine at a slow rate on its own.



For more information about this type of nerve block, watch HRH's video, **Continuous Peripheral Nerve Block for Post-operative Pain Relief**, at <https://youtu.be/jacql4myBn0>

If you have any questions about the nerve block, please speak with your surgeon or anesthesiologist during your pre-screening appointment or on the day of your surgery.

Non-Medicine Methods

Non-medicine methods can help relieve pain. Some of these include:

- Meditation, relaxation, distraction with breathing, and imagery techniques.
- Physical techniques, such as positioning, movement, and cold packs.

Distraction: Focusing your attention on something other than the pain can make you less aware of the pain. Distraction may work well while you are waiting for the pain medicine to take effect.

1. Concentrate on your breathing. Breathe out slowly and feel yourself begin to relax. Feel the tension leave your body. Breathe in and out, slowly and regularly, at a speed that is comfortable for you.
2. Close your eyes and focus on an object or a quiet place.

Positioning: You may find that positioning yourself in a propped up, partially reclined position is the most comfortable position. You may also lie down, facing up, with a pillow under your operated shoulder and elbow.



Sleeping on your back

- Place a pillow underneath your operated shoulder and elbow.
- You can also place a pillow under your ankles to improve your blood circulation and prevent swelling.



Sleeping on your side

- Place a pillow across your chest to support the operated side.



Sleeping in a propped up or partially reclined position

- Use pillows while sitting or lying down.



Sitting on a chair

- Support your lower and upper arm with pillow(s) to keep your elbow and shoulder at a neutral, comfortable position.

Cold Packs: Cooling the affected area will help control the pain by reducing swelling, relaxing muscles, and slowing the pain signals to the brain from the nerves. If you are interested in using a cold machine (compression device) in addition to the cold packs, please speak to your surgeon.

When applying a cold pack:

- Apply the pack for 20 minutes at a time, 4 to 6 times a day.
- Make sure you place a towel or cloth between the pack and your skin.

How do I care for my incision?

Instructions on Caring for your Incision

Dressing Care

After your surgery, we will cover your incision with either a waterproof dressing (Aquacel®) or a white bandage dressing.

- **Keep your dressing on for the first 5 days.** This will allow the incision area to heal and prevent it from getting wet.
- Do not take a bath while wearing your dressing.
- **If you have AN AQUACEL® DRESSING:**
 - You may shower with the dressing. After showering, pat the dressing dry with a clean towel.
 - Remove the Aquacel® dressing after 5 days or if:
 - It becomes loose, starts to fall off, or will not stay in place.
 - The dressing is leaking and no longer completely sealed.
 - There is a large amount of fluid (drainage) under the dressing and it starts to seep out. If this happens, please see your surgeon

CAUTION: If you are on a continuous interscalene nerve block, **WAIT until you have removed the nerve block on day 3 to shower with the Aquacel® dressing.**



To remove the dressing:

1. Wash your hands with soap and water.
2. Gently press down on the corner of the Aquacel® dressing with one hand.
3. Use the other hand to slowly lift up an edge of the dressing.
4. Stretch the edge of the dressing **down and out** to break the seal between your skin and the tape of the dressing. **Do not pull the dressing up.**
5. Slowly work your way around the dressing, repeating steps 2 to 4, until the dressing is loose. Remove the dressing.
6. If the incision is leaking fluid, apply a dry gauze covering. If there is no leakage, you can keep the incision open to air.

Instructions on Caring for your Incision





<p>Dressing Care (continued)</p>	<ul style="list-style-type: none"> • If you have a WHITE BANDAGE DRESSING: <ul style="list-style-type: none"> • DO NOT shower with this dressing. Sponge bathe only. • Remove the white bandage dressing after 5 days by peeling it off.
<p>Incision Care</p>	<ul style="list-style-type: none"> • After you remove your dressing on day 5, you may shower with the incision uncovered (see Showering/Bathing instructions on p. 34). • You may use a strip adhesive dressing (such as Band-Aid™ or Elastoplast™) that you can cut to size and place over the incision. <ul style="list-style-type: none"> • Change the strip adhesive dressing every 2 to 3 days. • After your first clinic visit, we will ask you to keep the incision uncovered. • Your surgeon will remove your staples 10 days after your surgery, at your follow-up appointment in the Fracture clinic.



How do I wear the sling?

After your surgery, we will give you a sling to wear. The sling is designed to keep your operated shoulder in a comfortable position after your surgery.

Instructions on Putting the Sling On


<p>1</p>  <p>Sit down in a chair. Place the sling on your lap or a supportive surface (such as a table).</p>	<p>2</p>  <p>Place the forearm of your operated arm into the sling pocket.</p>	<p>3</p>  <p>Pull the strap behind your neck and secure the strap with Velcro™. Adjust the strap and shoulder pad so they are resting comfortably on your neck.</p>	<p>4</p>  <p>Make sure your elbow is resting at a 90-degree angle (L-shape) in the sling pocket and the sling is supporting your wrist.</p>
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Keep your elbow at the same level to or lower than your hand.

You may place your thumb in the thumb loop, if comfortable.

Support your wrist with the sling.

You do not need to wear a waist belt with the sling.



You should use the sling for comfort and wear it most of the day. You may remove it a couple times a day to do self-care activities.

If you need to clean the sling, use soap and water and lay the sling flat to dry.

Please check with your doctor on when you can wean off the sling.

What exercises should I do to prevent complications after my surgery?

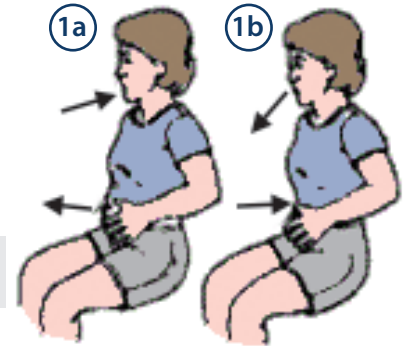
Prevention Exercises: After surgery, we encourage you to do the following exercises to help prevent blood clots in your arm, legs, and lungs. Your nurse and/or physiotherapist may review these with you.

1 Deep Breathing and Coughing

Do this exercise in any position (such as lying in bed or sitting in a chair).

- 1a Take 5 deep breaths.
- 1b Then cough 2 to 3 times.

REPS: Do this every 15 minutes while awake.



2 Hand Exercises

- Open and close your hand.

REPS: Do this every hour while awake.

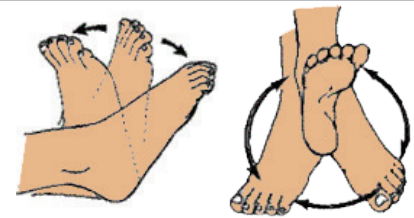


3 Ankle Pumping

Do this exercise while lying on your back or sitting up in bed.

- Pump your ankles by pointing your foot up and then down as far as possible. Pump each ankle 20 times.
- Instead of pumping, you may also move your ankles in circles for 20 times each.

REPS: Do this every hour while awake.



Make sure you keep your legs straight. You should feel a stretch in your calf muscles.

Home Exercises: You will start to do **the Home Exercise Program** (p. 47), as directed, and repeat them 3 times a day. These home exercises will become your homework while you are in the hospital and after your leave. Home exercises are important to reduce stiffness and swelling and to maximize the range of motion of your new joint. While in the hospital, your physiotherapist will instruct you on the proper way to do these exercises and will review them, as needed.

When can I return to my normal activities?

Healing after surgery can take several months. Too much activity, too early, can interfere with the healing process. Follow the instructions that your surgeon gave you, before you had surgery. If you have questions or are unsure about some of the instructions, speak with your surgeon at your first follow-up visit.

Instructions on Returning to Normal Activities	
Diet	<ul style="list-style-type: none"> • It is normal to feel tired and have a poor appetite after surgery. This may last for a few weeks. You may also experience constipation from your pain medicine. • Drink plenty of water, eat fruits and vegetables, and add fibre to your diet to give you energy and prevent constipation. • You may need to ask someone to help cut your food to manageable bites.
Showering/ Bathing	<ul style="list-style-type: none"> • If you have the white bandage dressing, wait until you have removed this dressing on day 5 to shower. • If you have the Aquacel® dressing, you may shower with this dressing on. However, if you are also on a continuous interscalene nerve block, DO NOT shower with the Aquacel® dressing until after you have removed the nerve block on day 3. • Do not take a bath until 2 weeks after surgery. <div style="border: 1px solid #ccc; border-radius: 10px; padding: 10px; margin-top: 10px;"> <p>To shower:</p> <ol style="list-style-type: none"> 1. Remove your sling and support your shoulder by resting your operated arm on your stomach. 2. Wash under your operated arm by bending forward, letting your operated arm hang loose. Use your other arm to wash under the armpit. 3. Wash your unoperated arm by keeping your operated shoulder and upper arm tight against your side. Use the hand of your operated arm to wash your unoperated arm. 4. Dry armpits and apply talcum powder. </div> <div style="border: 1px solid #ccc; border-radius: 10px; padding: 10px; margin-top: 10px; background-color: #e6f2ff;"> <p>You may wish to buy a long-handled sponge and hand-held shower head to help you wash your back, legs, and feet.</p> </div>

Instructions on Returning to Normal Activities (continued)

Exercises	<ul style="list-style-type: none"> • Keep this guide handy to help you follow your exercise routine. See Appendix E. Home Exercise Program (p. 47). Do your exercises as directed in Appendix E. • The physiotherapist at your outpatient physiotherapy visit will progress your exercises. • To keep your pain under control, take your pain medicines (see p. 27). • To reduce and control swelling, ice every 2 to 3 hours, for 20 minutes. Remember to put a towel or cloth between your skin and the ice.
Getting Dressed	<ul style="list-style-type: none"> • We recommend wearing the following clothing to help you with being independent after surgery: <ul style="list-style-type: none"> • Loose-fitting shirts that are larger than the regular shirts you wear. • Clothing that buttons up or zips up in the front. • An undershirt with large armholes. • Pants, skirt, or shorts with an elastic waistband. • Supportive slip-on shoes or shoes with Velcro™ fasteners or elastic shoelaces. <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p>To dress your upper body:</p> <ol style="list-style-type: none"> 1. Sit at the edge of your bed or chair. 2. Remove the sling. 3. Dress your operated arm first. Hang your operated arm by your side. Slide the arm into the hole of the shirt sleeve. Use your unoperated arm to assist while your operated arm hangs. 4. Use your unoperated arm to bring the shirt around your back and slide your unoperated arm into the shirt sleeve. 5. Fasten the buttons using only the hand of your unoperated arm. 6. Put the sling back on the operated arm. </div>

Instructions on Returning to Normal Activities (continued)

Sleeping	<ul style="list-style-type: none"> You may sleep facing up with pillows underneath the operated shoulder and elbow. This will help protect the operated area and minimize pain. If it more comfortable, you can try propping yourself up in a partially reclined position (see p. 29). You must wear your sling while sleeping for at least the first month after surgery, or as directed by your surgeon. Never use your arm to push yourself up in bed or from a chair, as this may cause you to re-injure the joint.
Household Chores	<ul style="list-style-type: none"> For the first 6 weeks, do not lift anything heavier than a coffee cup. For the first 3 months, avoid chores that involve excessive bending or lifting. This includes cleaning the floor, taking out the garbage, and doing laundry.
Sexual Activity	<ul style="list-style-type: none"> You may resume sexual activity if you feel comfortable. Try positions gently and stop if you have pain. If you are not sure about positions, speak with your surgeon.
Driving/ Flying	<ul style="list-style-type: none"> You may start driving when you are able to control your vehicle with 2 hands. This is usually 4 to 6 weeks after surgery. You will still need to wear your seatbelt appropriately, even over your operated shoulder. You may travel short distances as a passenger. Sitting for too long can lead to stiffness and pain. You may travel by plane or longer distances 6 weeks after surgery. Remember to get up and walk around, and do ankle and hand pumping exercises while on the plane. You may set off security alarms by your shoulder components. A letter from your surgeon will not excuse you from security precautions at any airport. While travelling, stop and change positions every hour to prevent joint discomfort and stiffness.
Dental Work	<ul style="list-style-type: none"> Artificial joints can become infected after dental work, including simple procedures, such as a cleaning. To reduce your risk of infection, do not get any dental work done 6 weeks before surgery and within the first 3 months after surgery. Let your dentist know that you have had a shoulder replacement. They may need to order antibiotics to help prevent infection.

Instructions on Returning to Normal Activities (continued)

Return to Work	<ul style="list-style-type: none">• Your surgeon will instruct you on when you will be able to return to work.
Leisure and sport activities	<ul style="list-style-type: none">• The most important activities after your surgery are to keep moving, do the prescribed shoulder exercises, and follow the shoulder precautions.• At 5 to 6 weeks after surgery, start to gradually increase your activity with ACTIVE range of motion, as you are able to tolerate.• At 6 to 8 weeks after surgery, start to do gentle strengthening within your pain limits, as your surgeon/physiotherapist prescribed.• At 8 to 12 weeks after surgery, you may return to your day-to-day activities and some mild recreational activities. Before you start any activity, speak with your surgeon about what activities you can and cannot do.



Follow-up Appointments

Post-operative (follow-up) visits help your surgeon know that your shoulder is healing well. **Please do not skip your scheduled follow-up visits.** These visits ensure that you have a safe and effective recovery from your shoulder replacement surgery.



If you have a problem with your shoulder before the first follow-up visit, call your surgeon right away.

- Follow-up visit #1:** We will schedule your first follow-up visit with the surgeon in the Fracture Clinic. This first follow-up visit usually takes place 1 to 2 weeks after your shoulder replacement surgery.
- Follow-up visit #2:** We will schedule this around 2 to 3 months following the date of your surgery, depending on your surgeon.

After your 2nd visit, your surgeon will decide if you need any more follow-up visits. This depends on your specific circumstances.



What should I watch out for after my surgery?

Visit your nearest Emergency Department if you experience any of the following symptoms:

- Shortness of breath or difficulty in breathing.
- Chest pain, tightness, or pressure.
- A significant increase in pain, swelling or redness in your arms or calf/calves.
- A sudden, severe increase in pain in your new joint that is not relieved with pain medicine.

Notify your surgeon/family doctor right away if you experience any of the following symptoms:

- Increased redness, swelling or a sudden increase in bruising around the incision site.
- Fluid from the incision line for more than 4 days after leaving the hospital.
- A foul smell, or yellow or green fluid coming from the incision line.
- Excessive bleeding.
- Any other signs or symptoms of infection (such as a bladder infection, tooth infection, etc.).
- A persistent increase in your temperature (over 38°C or 100.4°F).

APPENDIX A. HOME CARE SUPPORT SERVICES (PRIVATE)

Most companies offer the following 3 types of service:

Companionship: Attending appointments or outings with clients, keeping clients company, encouraging favourite activities, such as playing cards or having conversations, home visits.

Personal Care: Helping clients with personal care and hygiene, such as bathing, dressing and grooming, help with eating, reminding about medicines, and others.

Home Management: Helping clients maintain a clean and comfortable home, including carrying out routine homemaking tasks such as housekeeping, laundry services as well as grocery shopping and meal preparation.

Private home care services are available in the community to provide help with daily activities in the home or specialized care for loved ones with medical needs. The following is a list of private companies offering the above home care services. Fees, the type of home care support and additional services provided, and areas served differ between companies. For a full list of private home care services, please search Home Care Ontario's website at <http://www.homecareontario.ca> or the Yellow Pages™.

Home Care Service	Contact Information
AgTa Home Health Care	Tel: (905) 760-2482 / Toll-free: 1 (866) 528-4753 Web: www.agtahomecare.com
Bayshore HealthCare	Toll-free: 1 (877) 289-3997 Web: www.bayshore.ca
BrightStar Care	Tel: (647) 793-7007 Web: www.brightstarcare.ca
CANES Community Care	Tel: (416) 743-3892 Web: www.canes.on.ca
Care 2000™ Health Services	Tel: (416) 447-8409 Web: www.care2000healthservices.com
CHATS (Community & Home Assistance to Seniors)	Tel: (905) 713-6596 / Toll-free: 1 (877) 452-4287 Web: www.chats.on.ca

Disclaimer: This list is intended to provide information only. It does not imply a recommendation or endorsement by Humber River Health. Use of any of the services listed here will be at your own discretion and risk.

Home Care Service	Contact Information
Circle of Care	Tel: (416) 635-2860 Web: www.circleofcare.com
Comfort Keepers	Tel: (416) 663-2930 Web: www.comfortkeepers.ca
Eldercare Home Health	Tel: (416) 482-8292 Web: www.eldercarehomehealth.com
Home Care Assistance	Tel: (905) 597-5825 Web: www.homecareassistance-toronto.com
Home Health Care Assistance and Professionals, Inc.	Tel: (647) 748-5006 Web: www.homehealthcareapi.com
Home Instead Senior Care	Tel: (416) 972-5096 Web: www.homeinstead.ca
HomeWell Care Services	Tel: (905) 509-8469 Web: homewelldurham.com
Living Assistance Services	Toll-free: 1 (855) 483-2273 Web: www.laservices.ca
Lumacare (formerly Downsview Services for Seniors)	Tel: (416) 398-5511 Web: lumacare.ca
North York Seniors Centre	Tel: (416) 733-4111 Web: www.nyseniors.org
ParaMed™	Toll-free: 1 (800) 465-5054 Web: www.paramed.com
Premier Homecare Services	Tel: (905) 902-5299 Web: www.premierhomecareservices.com
Qualicare® Family Homecare	Toll-free: 1 (888) 591-0017 Web: www.qualicare.com
RNS Health Care Services Inc. (formerly Regional Nursing Services)	Tel: (289) 841-7150 / Toll-free: 1 (855) 888-9983 Web: rnshc.com

Home Care Service	Contact Information
Retire-at-Home™ Services	Toll-free: 1 (877) 444-9949 Web: www.retireathome.com
Robbins Home Health Provider	Tel (Toronto): (647) 347-0227 / Tel (Halton): (905) 630-7237 Web: robbinshomehealth.ca
Saint Elizabeth	Tel: (905) 940-9655 / Toll-free: 1 (800) 463-1763 Web: sehc.com
Selectacare Limited®	Tel: (416) 225-8900 Web: www.selectacare.ca
Spectrum Health Care	Tel (Toronto): (647) 952-3425 / Tel (Peel): (647) 953-1457 / Tel (York): (647) 953-2976 Web: spectrumhealthcare.com
S.R.T. Med-Staff	Tel: (416) 968-0833 / Toll-free: 1 (800) 650-2297 Web: www.srtmedstaff.com
St. Clair West Services for Seniors	Tel: (416) 787-2114 Web: www.servicesforseniors.ca
Storefront Humber Inc.	Tel: (416) 259-4207 Web: www.storefronthumber.ca
Toronto Senior Care	Tel: (416) 898-1079 Web: torontoseniorcare.com
Total Home & Healthcare Services	Toll-free: 1 (866) 227-3207 Web: www.tchomecare.ca
VHA Home Healthcare	Tel (GTA): (416) 489-2500 / Toll-free: 1 (888) 314-6622 / Tel (London): (519) 645-2410 Web: www.vha.ca
We Care® Home Health Services	Toll-free: 1 (866) 729-3227 Web: www.cbi.ca/web/we-care-home-health-services
West Toronto Support Services for Seniors (Silver Care)	Tel (Bloor): (416) 653-3535 / Tel (Weston): (416) 249-7946 Web: wtss.org

APPENDIX B. SHORT STAY RESPITE OPTIONS (PRIVATE)

Make sure you have someone to help care for you after your surgery. Please arrange this before your date of surgery. If you are having trouble arranging care at home, you may consider respite care at a short-stay retirement home as an option. However, short stay retirement homes are at an out-of-pocket expense.

Location	Facility	Address	Phone Number
Aurora	Kingsway Arms Aurora	145 Murray Dr.	(905) 841-2777 or (416) 505-4825
	Park Place	15055 Yonge St.	(905) 727-2952 or (289) 879-0644
Etobicoke	Centennial Park Place	25 Centennial Park Rd.	(416) 621-2139
	Kingsway Retirement Living	4251 Dundas St. W.	(416) 236-7575
	Scarlett Heights	4005 Eglinton Ave. W.	(647) 846-7006
Mississauga	Amica at City Centre	380 Princess Royal Dr.	(416) 561-4770
	Constitution Place	3051 Constitution Blvd.	(905) 279-8554 ext. 2004 or (416) 617-5560
North York	Canterbury Place	1 Canterbury Pl.	(416) 227-1643
	Queens Estate	265 Queens Dr.	(416) 234-0363
	Weston Gardens	303 Queens Dr.	(416) 241-1113
Richmond Hill	Sunrise of Richmond Hill	9800 Yonge St.	(905) 883-6963
Thornhill	Amica of Thornhill	546 Steeles Ave. W.	(905) 886-3400
	Four Elms	1500 Steeles Ave. W.	(905) 738-0905
	Sunrise of Thornhill	484 Steeles Ave. W.	(905) 731-4300 or (905) 747-4233
Toronto	Davenhill Senior Living	877 Yonge St.	(416) 923- 8887
	St. Hilda's Towers	2339 Dufferin St.	(416) 781-6621
	Terrace Gardens	3705 Bathurst St.	(416) 789-7670
Vaughan	Richview Manor	10500 Dufferin St.	(905) 585-5000
	Villa Da Vinci Retirement Residence	7371 Martin Grove Rd.	(905) 264-9119
York	Harold and Grace Baker Centre	1 Northwestern Ave.	(416) 654-2889 ext. 228

Disclaimer: This list is intended to provide information only. It does not imply a recommendation or endorsement by Humber River Health. Use of any of the services listed here will be at your own discretion and risk.

APPENDIX C. TRANSPORTATION OPTIONS

The following are a list of transportation options if you need help getting to your rehabilitation clinic appointments. Fees, types of services and areas served differ between companies.

Type	Service	Contact Information
Non-Emergency Ambulance Services	AmbuTrans Medical Transportation Services	Tel: (416) 423-2323 / Toll-Free: 1 (888) 569-2323 Email: info@ambutrans.on.ca Web: www.ambutrans.on.ca
	MedicVan Patient Transfer Services Inc.	Tel: (416) 222-8470 / Tel: (905) 761-0039 Toll free: 1 (866) 764-2424 Email: info@medicvan.com Web: www.medicvan.com
	Spectrum Patient Services	Tel: 1 (866) 527-9191 Website: www.spectrumpatientservices.com
	Voyageur Medical Non-Emergency Patient Transportation	Tel: 1 (855) 263-7163 Email: admin@voyageurtransportation.ca Web: www.voyageurmedical.ca
Wheelchair Accessible Transportation	Dignity Transportation Inc.	Tel: (416) 398-2222 Web: http://www.dignitytransportation.com
	GTA Accessible Transportation	Tel: (416) 834-5559 / Toll-free: 1 (800) 936-3040 Web: http://gtaaccessible.com
	TTC Wheel-Trans	You may apply for Wheel-Trans to see if you qualify for this service. Please complete and submit an application 1 month before your surgery. Web: https://www.ttc.ca/WheelTrans/How_to_apply/index.jsp For Wheel-Trans registered users - book in advance online at https://mywheel-trans.ttc.ca or call the automated touch-tone Service at (416) 397-8000, option #2. For any questions regarding your ride, contact Reservations at (416) 393-4222.
	Wheelchair Accessible Transit Inc.	Tel: (416) 884-9898 / Toll-free: 1 (877) 225-2212 Web: http://www.wheelchairtransit.com

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Type	Service	Contact Information
Transportation Services for Adults, 55 years of age or older	Toronto Ride	Tel: (416) 481-5250 Email: admin@torontoride.ca Web: http://www.torontoride.ca
	iRIDEPlus	Tel: 1 (844) 474-3301 Web: http://www.irideplus.com

APPENDIX D. HEALTHCARE EQUIPMENT STORES

This is a partial list* of vendors/stores that sell equipment that your therapist may recommend. Many drug stores may also sell equipment. Some department stores may have a healthcare product section. Please check the Yellow Pages™ for a more complete list of stores closer to your home.

Healthcare Equipment Store	Contact Information	Equipment Rentals	Delivery	Various Locations
AgTa Home Health Care	7695 Jane St., Unit #3, Vaughan, Ont. (at Hwy 7) Tel: (905) 760-2482 / Toll-free: 1 (866) 528-4753 Web: www.agtahomecare.com	✓	✓	
Baygreen Home Health	8 Green Ln., Thornhill, Ont. Tel: (905) 771-0010 Web: www.baygreen.ca	✓	✓	
Care Forever Home Health Care	2563 Major Mackenzie Dr. W., Unit #12, Maple, Ont. Tel: (905) 832-4988 / Toll-free: 1 (844) 487-2252 Web: www.careforeverdepot.com	✓	✓	
Canadian Compounding Pharmacy	2920 Bloor St. W., Etobicoke, Ont. (at Royal York Rd.) Tel: (416) 239-3566 Web: www.medspharmacy.ca			✓
Home Medical Equipment (HME)	77 St. Regis Cres. S., Toronto, Ont. (at Keele St.) Tel: (416) 633-9333 Web: www.hmemobility.com	✓		
Hunts Health Care	109 Woodbine Downs Blvd., Unit 7, Toronto, Ont. Tel: (416) 798-1303 Web: www.huntshealthcare.ca	✓		
MedicalMart® Suppliers	550 Matheson Blvd. W., Mississauga, Ont. Tel: (905) 624-2011 Web: medimart.com	✓	✓	
The Medical Spot	313 Westwood Ave, Toronto, Ont. Tel: (416) 656-2661 Web: themedicalspot.ca	✓		

Disclaimer: This list is intended to provide information only. It does not imply a recommendation or endorsement by Humber River Health. Use of any of the services listed here will be at your own discretion and risk.

Healthcare Equipment Store	Contact Information	Equipment Rentals	Delivery	Various Locations
Mediwise Healthcare Solutions	2677 Steeles Ave. W., Toronto, Ont. Tel: (416) 514-1400 Web: mediwise.ca	✓		
Mobility Savers Inc.	39/40-445 Midwest Rd., Scarborough, Ont. Tel: (416) 750-1940	✓	✓	
Motion (formerly Motion Specialties)	202 Sparks Ave., Toronto, Ont. Tel: (905) 715-7853 / Toll-free: 1 (888) 222-2172 Web: motioncares.ca	✓	✓	✓
North-Med Pharmacy	7131 Bathurst St., Unit 101, Thornhill, Ont. Tel: (905) 771-7505		✓	
Senior's Store	4974 Dundas St. W., Etobicoke, Ont. Tel: (647) 378-4258 / Toll-free: 1 (888) 795-7718 Web: www.seniorsstore.ca		✓	
Silver Cross® Note: Used equipment	225 The East Mall, Unit 16, Toronto, Ont. Tel: (416) 915-4479 / Toll-free: 1 (844) 352-7677 Web: silvercross.com	✓	✓	✓
Starkmans Surgical Supply Inc.	1243 Bathurst St., Toronto, Ont. M (at Davenport Rd.) Tel: (416) 534-8411 Web: www.starkmans.com	✓	✓	
Vaughan Wheelchair Home Health Supplies	7700 Pine Valley Dr., Unit 4A, Vaughan, Ont. Tel: (905) 264-6653		✓	
Vital Mobility Home Health Care	130 Bass Pro Mills, Unit 62, Vaughan, Ont., Tel: (905) 532-9494 Web: www.vitalmobility.ca	✓	✓	
WellWise (formerly Shoppers Home Health Care)	528 Lawrence Ave. W., Unit 16A, Toronto, Ont., Tel: (416) 789-3368 Toll-free: 1 (866) 220-3837 Web: www.wellwise.ca	✓	✓	✓

APPENDIX E. HOME EXERCISE PROGRAM

Instructions: Perform these shoulder exercises **BEFORE and AFTER** your surgery.

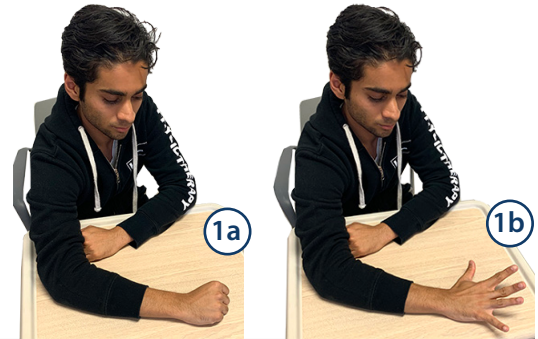
Always exercise within your pain limits!



1 Hand Open/Close

- 1a In any position, make a tight fist.
- 1b Then straighten your fingers fully.

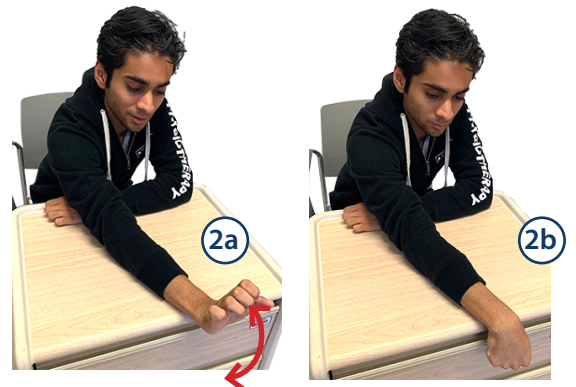
REPS: Do this exercise 10 times, every hour.



2 Wrist Flexion/Extension

- 2a Support your forearm on a table or pillow with your hand relaxed over the edge. Extend your wrist and hold for 5 seconds.
- 2b Then, bend your wrist down over the edge of the table and hold for 5 seconds.

REPS: Do this exercise 10 times, 3 to 5 times a day.

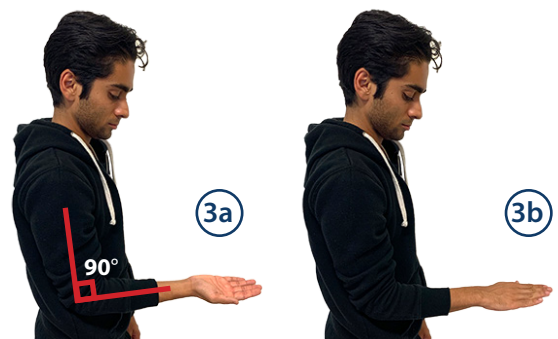


3 Forearm Supination/Pronation

Have your arm at your side and bend your elbow at a right angle (90 degrees).

- 3a Turn your palm up. Hold for 5 seconds.
- 3b Turn your palm down. Hold for 5 seconds.

REPS: Do this exercise 10 times, 3 to 5 times a day.



4 Elbow Flexion/Extension

While in a sit or stand position:

- 4a Bend your elbow, bringing your hand towards your shoulder. Hold for 5 seconds. You can use your unaffected arm to help bend your elbow.
- 4b Straighten and hold for another 5 seconds.

REPS: Do this exercise 5 to 10 times, 3 to 5 times a day.

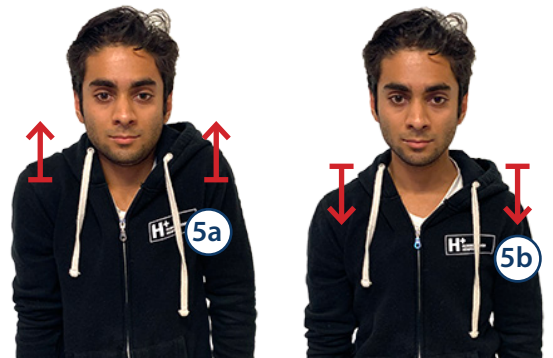


5 Shoulder Shrug

While in a sit or stand position:

- 5a Shrug your shoulders and hold for 5 seconds.
- 5b Then, push your shoulders down and hold for 5 seconds.

REPS: Do this exercise 5 to 10 times, 3 to 5 times a day.



6 Pendulum

While in a sit or stand position, lean on a table with your unaffected arm.

- Let your operated arm hang relaxed straight down. Swing your BODY so that your operated arm swings in a circle.

REPS: Do this exercise 10 times in one direction. Then, do this exercise 10 times in the other direction. Repeat 3 to 5 times a day.

Start at week 2 after surgery



Instructions: Keep track of your progress! Place a checkmark every time you complete an exercise. You should be doing each of these exercises before and after your surgery.

My Exercise Diary														
Exercises	Week of			Week of			Week of			Week of				
	S	M	T	W	T	F	S	S	M	T	W	T	F	S
1. Hand Open/ Close														
2. Wrist Flexion/ Extension														
3. Forearm Supination/ Pronation														
4. Elbow Flexion/ Extension														
5. Shoulder Shrug														
6. Pendulum (start at week 2)														

What is iron?

Iron is a mineral present in small amounts in the body.

Iron is important because it:

- Is a building block of red blood cells, which carry oxygen and food to the body.
- Helps the brain to work.
- Gives you energy.
- Helps you grow properly.

What are some of the symptoms of low iron levels?

Low iron levels usually develop slowly. People who have low iron levels may have some of the following symptoms:

- Low energy - You may become tired quickly with even small amounts of activity
- Muscle weakness
- Pale skin colour
- Weight loss or an inability to gain weight
- Difficulty concentrating and learning
- Shortness of breath
- Irritability.

How can I increase my iron levels?

Eating foods rich in iron is one of the easiest ways to increase the iron level in your body. If your iron level is very low, your doctor may suggest an iron supplement.

There are two types of iron found in food: heme and non-heme iron. Your body can use heme iron easier than non-heme iron.

What is heme iron?

Only animal sources such as beef, poultry and fish contain heme iron. Heme iron is well absorbed by the body and helps your body use non-heme iron more effectively.



What is non-heme iron?

Plant foods like beans, lentils, whole grains, dried fruits, nuts and some fruits, vegetables, fortified breakfast cereals, enriched pasta, and eggs contain non-heme iron. Non-heme iron is not as easy for your body to use.



Non-heme iron becomes easier to use when it is consumed with heme containing foods.

What are some of the things I should remember when eating a diet rich in iron?

- Most colourful foods contain iron: red meats, green leafy vegetables, and rich golden brown whole wheat. The iron contained in the food you eat is greater than the amount of iron your body absorbs (for example, sirloin steak contains 2.8 mg of iron but only 0.42 mg of the iron is absorbed). Foods rich in vitamin C (for example, bell peppers, kiwi, oranges, strawberries, broccoli, kale, spinach) increase the amount of iron that is absorbed.
- Tea, coffee, cola drinks and chocolate contain oxalates. Oxalates prevent the absorption of



iron. Do not consume foods containing oxalates within an hour of meals to prevent interference with iron absorption.



- Foods rich in calcium (for example, milk, yogurt and cheese, fortified soy beverage) also interfere with the absorption of iron. Do not eat calcium rich foods at the same time as iron rich foods.
- Foods high in fibre decrease the absorption of iron; this effect can be off set by consuming foods rich in vitamin C.
- See the table on p. 52 for common foods that are rich in iron.



- Iron may cause your stool to become black and sticky. Make sure you clean your skin well after a bowel movement to avoid skin irritation.
- Iron can be irritating to the stomach. It may help you to take multiple tablets throughout the day rather than the entire dose at one time.
- Take your iron supplements on an empty stomach (1 hour before meals or 2 hours after meals). If you have a sensitive stomach, take the supplement 2 hours after meals to avoid stomach upset.
- If you take an antacid (for example, Maalox®) on a regular basis, keep a 30-minute interval between the antacid dose and your iron supplement because antacids block the absorption of iron.
- Try to remain in a sitting position for 30 minutes after taking your iron supplement to avoid stomach upset.

What should I know about iron supplements?

Sometimes, if your iron levels are very low, your doctor may suggest an iron supplement. If your doctor recommends an iron supplement, here are some things to remember.

It is possible to get too much iron. Too much iron can cause poisoning. Never take an iron supplement without consulting your doctor or dietitian.



Do not take your iron supplement with milk, coffee, tea, cola or chocolate as these foods block the absorption of iron.



- If you have been feeling tired and run down, ask your doctor to check your blood iron levels.

How should I take my iron supplement?

You can take your iron supplement with water or juice. A juice containing vitamin C may increase the amount of iron that is absorbed. A good suggestion would be to take your iron supplement with prune juice. Iron supplements can cause constipation. Prune juice is an iron rich, natural laxative, which will help with constipation.

What should I do if I cannot take my iron supplement?

Never stop your iron without speaking to your doctor about alternatives that may be available to you. There are many types of iron supplements. You may need a liquid form, or one that is absorbed lower in the digestive system.

Foods Rich in Iron	Serving Size	Iron (mg)
Canned clams	90 g (3 oz).....	24.0
Liver (Pork)	75 g (2 1/2 oz)	13.4
Firm tofu	125 mL (1/2 cup).....	13.2
Grape nuts	62.5 mL (1/4 cup).....	8.1
Liver (Chicken, Turkey, or Lamb)	75 g (2 1/2 oz)	6.2 - 9.7
Cooked iron-enriched cream of wheat	125 mL (1/2 cup).....	7.9
Miso	250 mL (1 cup).....	7.5
Prune juice	125 mL (1/2 cup).....	5.5
Instant apple cinnamon oatmeal	1 packet	5.0
Liver (Beef).....	75 g (2 1/2 oz)	4.9
Soy flour.....	125 mL (1/2 cup).....	4.9
Honey Nut Cheerios [®]	250 mL (1 cup).....	4.7
Cooked black-eyed peas.....	250 mL (1 cup).....	4.3
Canned refried beans.....	250 mL (1 cup).....	4.2
Roasted pumpkin or squash seeds.....	125 mL (1/2 cup).....	4.2
Whole toasted sesame seeds.....	125 mL (1/2 cup).....	4.2
Canned white beans	125 mL (1/2 cup).....	4.1
Corn Flakes [®]	250 mL (1 cup).....	3.5
Chicken-flavoured ramen noodles.....	1 package.....	3.3
Canned chickpeas	250 mL (1 cup).....	3.2
Black strap molasses.....	15 mL (1 tbsp).....	3.2
Broiled sirloin steak.....	100 g (3.5 oz).....	2.8
Baked potato with skin.....	1	2.7
Cooked egg noodles	250 mL (1 cup).....	2.7
Oat bran	125 mL (1/2 cup).....	2.7
Tahini	30 mL (2 tbsp).....	2.6
Ground beef (lean-broiled)	100 g (3.5 oz).....	2.4
Dark turkey meat (no skin).....	100 g (3.5 oz).....	2.3
Naan bread	1/2.....	2.3
Lamb chops.....	100 g (3.5 oz).....	2.3
Canned shrimp.....	90 g (3 oz).....	2.3
Enriched pasta, cooked	250 mL (1 cup).....	2.0
Cabbage rolls with meat.....	2.....	2.1
Lean roasted ham.....	100 g (3.5 oz).....	1.5
Dark chicken meat (no skin)	100 g (3.5 oz).....	1.1
Fortified cereal.....	125 mL (1/2 cup).....	4.5
Lentils	125 mL (1/2 cup).....	3.3
White rice	250 mL (1 cup).....	2.2