



Richard Michelin, DO
Shoulder and Elbow Specialist
Lasvegasshoulderelbow.com
Crovettiortho.com



PRIMARY SHOULDER/ELBOW SURGERY PRESCRIPTIONS

- Dr. Michelin is a big advocate of limiting narcotics post-operatively due to the current opioid pandemic and wide variety of complications that can arise when used over a long period of time. It is our goal to have you off all narcotic medications within 2-3 weeks from your surgery and transitioned completely to Tylenol and Anti-inflammatories. You DO NOT have to continue taking Oxycodone beyond 72 hours from surgery if your pain is well controlled.
- You will have to call the office for refill requests or discuss at your post-operative visits. Refills will be provided on a case-by-case basis based on the type of surgical procedure performed and each patient's individual needs. While we are advocates of limiting narcotics, we will not leave you in pain, we are a team and will help find a regimen to guide you through your recovery.
- If you have a pain management doctor you WILL NOT be given post-operative narcotic medications from our office. You will be required to come up with a post-operative pain plan and provide this to our office prior to your surgery.
- Narcan spray is provided in case of emergency opioid overdose. This should be kept in an accessible location within the home anytime opioids are present at home. This can be used for family members/children if opioids are mistakenly ingested.
- You may supplement your medication regimen with over-the-counter Tylenol or Acetaminophen as needed but make sure not to exceed more than 3000 mg in a day. This is recommended as you transition off of Percocet. PLEASE NOTE: Percocet contains 325 mg of Tylenol per tab. You should keep a record of Tylenol ingestion for safe dosing.
- DO NOT take Celecoxib if you have a history of a sulfa allergy, kidney disease, cardiac disease, or stomach ulcers
- You should monitor your blood pressure closely if you have a history of high blood pressure while take anti-inflammatory medications (Celecoxib). If your blood pressure remains elevated more than usual, stop taking your medication and consult with your doctor.
- Aspirin is added to the regimen to protect against potential blood clots post-operatively

Percocet 10/325 mg, take 1 tab every 4-6 hours as need for pain, dispense: 30

Narcan Nasal Spray (naloxone 4 mg/0.1 mL), spray 0.1 mL into one nostril upon signs of opioid overdose, call 911, may repeat once if no response within 2-3 minutes, dispense: 1

Celecoxib (Celebrex) 100 mg, take 1 pill twice daily, dispense: 60

Docusate Sodium (Colace) 100 mg, take 1 capsule as needed for constipation, do not take more than 300 mg in a day, dispense: 60

Odansetron (Zofran) 4 mg, take 1 pill every 8 hours as needed for nausea, Dispense: 10

Doxycycline 100 mg, take 1 capsule twice daily for 2 weeks, Dispense: 28

Aspirin 81 mg, take 1 pill twice daily for 30 days, Dispense: 60