



Shoulder Surgery

Post-surgery information and advice for patients following shoulder surgery.

Your surgery

You have received the following shoulder surgery:

- Subacromial Decompression** – This surgery is usually performed to relieve a shoulder impingement. The surgery involves widening the space around the rotator cuff tendon, so that it doesn't rub or catch on anything nearby.
- Rotator Cuff Repair** - Surgery may be used to treat rotator cuff tears if the tear is large or if other treatment options have not worked after three to six months. Damaged tendons of the rotator cuff muscles will be repaired by either suturing back together or anchoring back down. During the procedure a small amount may be shaved off the bones in your shoulder.
- Acromioclavicular Joint Stabilisation** – Surgery is performed to reduce and stabilise a dislocated acromioclavicular joint (the joint that connects your shoulder blade to your collar bone). There are many different procedures which can be used to achieve this.
- Capsular Release** – This surgery is performed to relieve a “frozen shoulder”. Thickened parts of the shoulder capsule are divided or cut out. Opening up the shoulder capsule in this way should greatly improve your range of movement.

Post-operative care

After your surgery you will be brought back to the Day Surgery Unit and will have dressings on your shoulder. You may have a mask on giving you some oxygen and the nurses will closely monitor your blood pressure, heart rate and oxygen levels.

You will be given a sling to wear on your operated arm. Your sling should remain in place for

Your nurse will provide you with information regarding your wound care and you will receive an appointment letter to attend the Orthopaedic Clinic, usually six weeks after your operation, although this may differ depending on your Consultant.

You will also be followed up by the Physiotherapy Department, usually the week after your operation. Your Ward Physiotherapist will arrange this appointment for you and your appointment information letter will be sent out to your home. **To get a good result post surgery it is very important to do your exercises as instructed overleaf.**

The length of rehabilitation you require will depend on the type of surgery you have had and you will be guided by your Physiotherapist. It is normal to experience pain for some time following your operation, however most people find the pain reduces significantly by three months post operative.

Removing and putting on your sling



1. Position the elbow in the corner of the sling and apply the neck strap across the back and over the unaffected shoulder.
2. Feed the loose strap end through the ring and fasten the hook.
3. The hand should be slightly elevated above the elbow. Place your thumb in the loop if desired.

Washing and dressing

For the duration of wearing your sling, it may be easier to wear loose clothing that can button or zip at the front.

When dressing, remove your sling and place your operated arm into the sleeve first, then reapply your sling once your top half is dressed. It may also be easier to wear trousers with an elasticated waist.

To avoid moving your arm away from your body too much, it is advised that you use a wipe or damp cloth to wipe underneath your armpit for the duration of your sling use.

General advice

Resting and sleeping:

Your sling should remain on whilst you are sitting, resting and sleeping unless your consultant tells you otherwise.

You can place pillows underneath your operated arm while sitting for comfort. Sleeping on your back with a pillow under your arm for support may be more comfortable initially.

Ice:

A bag of frozen peas/ice pack wrapped in a damp towel can be applied to your shoulder for 15 minutes at a time to reduce swelling and discomfort. This can be repeated every two hours for the first three days.

Driving:

The time it takes to return to driving differs depending on the type of operation you have had, please discuss this with your Consultant.

Returning to work and hobbies:

This will depend on your occupation and type of surgery. Please check with your Consultant.

Early exercises

1. Elbow, wrist, hand



Straighten your fingers and bend and fully straighten your elbow (you can use the other hand to assist, if you need to). Repeat 5 times.



Bend and straighten your elbow (you can use the other hand to assist, if you need to). Repeat 10 times, 3 times a day.

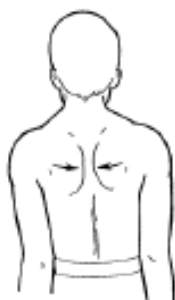


Support your arm against your body and bend your elbow to 90 degrees. Turn your palm up and down. Repeat 10 times, 3 times a day.



Move your wrist up and down as shown 10-20 times. Repeat 4 times a day.

2. Scapula retractions



Pinch shoulder blades together as shown. Hold for 3 seconds and let go. Do this 10 times. Repeat this exercise 5 times a day.

3. Pendulum



Stand leaning on a table with your non-operated hand. Keeping your arm relaxed, gently swing it backwards and forwards, side to side and round in small circles. Repeat 10 times in each direction.

Your Physiotherapist will progress these exercises during your out-patient appointments.

If you have had a Capsular Release, you want to move your arm as much as possible in all directions without restriction. Your Ward Physiotherapist will provide you with additional shoulder exercises.

Further information

For further information please contact

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- speak to a member of staff
- visit our website feedback section at: www.wihb.scot.nhs.uk or share your story at: www.careopinion.org.uk or tel. 0800 122 31 35
- tel. 01851 708069 Monday-Friday between 9am-5.30pm.

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