



## Shoulder Arthroscopy

What is shoulder arthroscopy?

- Arthroscopy is a procedure that lets your doctor do surgery inside a joint without making a large incision. A scope is used to assist with any repairs or cleaning of the joint. The incisions will be closed with sutures. The incisions leave scars that will fade with time.

Shoulder arthroscopy is used to treat many shoulder problems. You may be undergoing one or multiple of the following procedures:

- **Debridement:** Osteoarthritis is caused by breakdown of cartilage-the hard, thick tissue that cushions the joints. Debridement is completed by shaving and smoothing rough surfaces of the shoulder joint.
- **Removal of loose body:** A loose body is the piece of bone or cartilage that may have become loose in a shoulder injury. This may be put back into place but more likely will be removed.
- **Impingement syndrome:** Occurs when the shoulder area begins to swell and rub against a bone. This can occur in the tendons of the rotator cuff or the tendons connecting the bicep muscle to the shoulder. It can also occur in the bursa, which is a sac found between the rotator cuff and the top of the shoulder blade.
  - **Subacromial decompression (SAD):** Your doctor will increase the space in the shoulder area by removing the bursa. The bursa reforms in a few weeks.
  - **Distal clavicle resection (DCR):** If there is painful arthritis in the acromioclavicular joint, you may have part of the bone from the clavicle in your shoulder removed to prevent impingement.
  - **Biceps tendodesis or tenotomy:** If the bicep tendon is found to be frayed or torn, the doctor may cut the tendon at the insertion site. Using heavy stitches and a plastic anchor, the tendon will then be secured into the bone of the arm (bicep tendodesis). If the tendon is beyond repair, the tendon will be cut and not secured (bicep tenotomy). This may cause a “popeye” deformity of the bicep.
- **Rotator cuff repair:** Surgery is done to fix a tear in the muscles of the shoulder. It can also include cleaning the space between the rotator cuff tendons and the shoulder blade.
- **Instability repairs:** Repair for partial or full shoulder dislocation. A dislocation occurs when the upper arm bone comes out of socket. This makes the shoulder unstable-it may slip in or out of the socket, causing pain and limited motion of the shoulder.

What happens on the day of surgery?

- Surgery will take approximately 2 hours.
- You will have a large bandage on your shoulder and be wearing a sling in recovery.
- You will go home after 1-2 hours in the recovery room.

Immediate Post Op:

- Limit activity for 24 hours.
- Be sure you have someone to drive you home and stay with you for 24 hours.

- You should not drive until you are cleared by a healthcare provider to do so. You should no longer be taking pain medications and be able to react easily before driving.
- If you had general anesthesia, a sore throat may be experienced. Drink cold fluids, chew ice chips, or use throat lozenges to help relieve discomfort
- Rest today, increase activity tomorrow, as tolerated.
- Use ice packs one hour on/one hour off, especially for the first 24-48 hours.
- Blood tinged “watery” drainage is normal.

#### Interscalene Block:

- You may receive an interscalene block to help with pain control after surgery. A block is an injection completed by anesthesiology that “blocks” the nerves in your arm that are responsible for sensation and movement. This will result in weakness of your arm.
- Your breathing may feel more labored for up to 12 hours after surgery as a result of this. You may have a hoarse voice or droopy eyelid for several hours. With any nerve block, you can expect mild discomfort, swelling and bruising at the site of your injection. Please use cold compresses as necessary for comfort. Be very careful of your arm until sensation returns to normal.

#### Your Recovery:

- Your hand and arm may be swollen. This is normal and will improve in a few days. Sleep with your head and chest propped up in bed or in a recliner if more comfortable than your bed.
- Wear sling for 4 weeks or until instructed to do otherwise by Provider.
- Perform gripping, wrist and elbow motion exercises every hour. Perform pendulum exercises 3-4 times a day. A pendulum exercise is done by lowering your arm to your side, bending slightly, and rotating your arm in a circular motion. It is okay to discontinue the immobilizer for this activity only. Return to your sling one exercise complete.
- Do not lift any weight with affected arm. Do not attempt to reach up with your arm.
- **You may take off the dressing in 3 days.** Apply adhesive bandage over wounds and change daily if drainage. Otherwise it is ok to keep incision open to air.
- You may shower in 3 days. Wash with antibacterial soap and water, pat dry. No tub baths, pools, or other activities that your incisions are submerged in water until sutures or staples are removed.
- Take medicine as directed.
- **Pain medications can make you constipated. Use over the counter Colace (docusate) or Miralax (polyethelene glycol) or your choice of stool softener/laxative.**
- If you smoke, we strongly encourage you to stop. Smoking slows your body’s ability to heal.
- Follow up with Dr. Akre or the nurse practitioner in 7-10 days. Make sure you have a follow up appointment scheduled.

#### Long Term Treatment:

- Physical therapy may be utilized at least 1-3 times per week for up to 3-6 months. The first month will emphasize full assisted motion (passive) and in 2 months, more active motion. By 3 months, heavier weights can be used. An individualized plan will be discussed at your first post-operative office visit. Do not advance your activities with your surgical arm until released to do so.
- After surgery and physical therapy, you will probably have less pain and more strength in your shoulder. You should be able to lift and rotate your arm better. Some people have to avoid lifting heavy objects.

- When you can work depends on the work you do. Deskwork only in 1-2 weeks after surgery is ok.

Call the doctor if:

- Pain does not get better after taking pain medicine
- Inability to urinate
- Loose stitches or incision comes open
- Incision bleeds through large bandage
- Increased sign of infection: pain, swelling, warmth, redness, drainage, red streaks from incision fever, chills
- **IF YOU EXPERIENCE CHEST PAIN AND/OR DIFFICULTY BREATHING, CALL 911.**