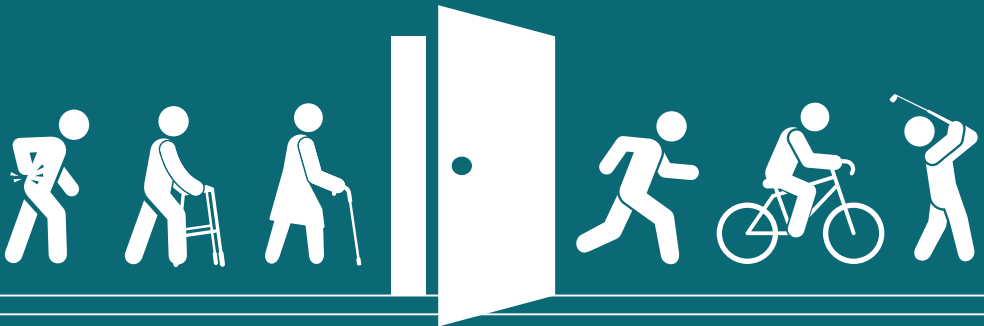




Blackrock Clinic

DEPARTMENT OF
ORTHOPAEDIC
& SPINAL SURGERY

Your guide to
Shoulder Surgery



Accredited by Joint Commission International

“Clinical Excellence, Personal Care”

CONTENTS	PAGE
Introduction	1
Shoulder Replacement Surgery	2
Preparing for Shoulder Surgery	4
Getting Around	6
Before Your Surgery	8
Hospital Care	9
Positioning Your Arm	11
Getting Dressed	14
Precautions	15
Going Home	16

About this booklet

The aim of this booklet is to give you a better understanding of shoulder replacement surgery. It contains advice on what you can do to help your operation and recovery go as smoothly as possible. To help you know what to expect, it also explains some of the care you will receive while you are in hospital.

Please bring this booklet with you when you come to the hospital for your operation.

About your treatment

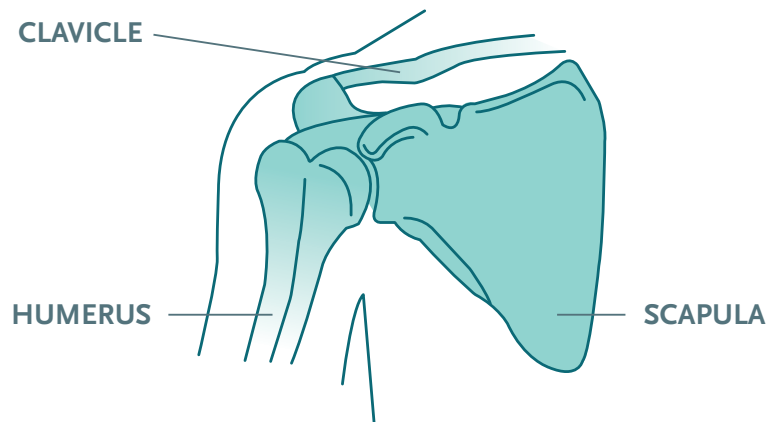
Shoulder replacement is major surgery, but it generally results in a much improved quality of life, with less pain. However, the operation itself is just one part of your treatment. The preparation beforehand and rehabilitation afterwards are just as important.

The advice contained in this booklet is general advice. Your surgeon or physiotherapist will let you know if they want you to do anything differently.

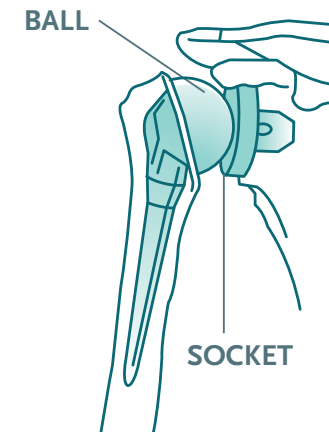
Shoulder Replacement Surgery

Shoulder joint

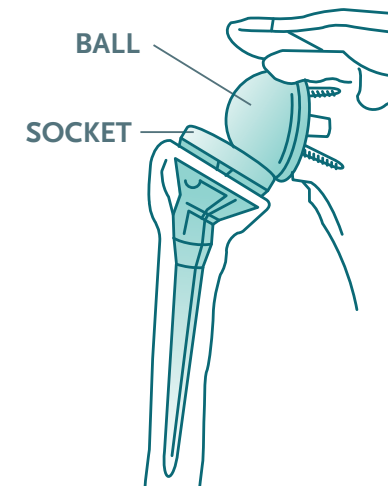
Your shoulder is a ball and socket joint and is made up of three bones; your humerus, clavicle (collarbone) and scapula (shoulder blade). The shoulder is covered in articular cartilage, a smooth substance that protects the bones and enables them to move easily. The muscles and tendons that surround the shoulder provide stability and support.



A total shoulder replacement replaces the head of the humerus (ball) with an artificial ball and stem as pictured below. The glenoid surface of the scapula is replaced with an artificial socket. Often bone cement is used to implant the prosthesis.



In a reverse shoulder replacement the anatomy of the shoulder joint is reversed as pictured below. The artificial ball is implanted into the glenoid and the head of the humerus is replaced with an artificial socket.



Preparing for your operation

Being as fit and healthy as possible before your operation will help you recover quickly afterwards and reduce the chance of complications.

The World Health Organisation (WHO) recommends 30 minutes of moderate intensity exercise at least 5 days a week. Take part in a physical activity suitable for your level of mobility and fitness. Examples include walking, swimming and exercise classes.



Smoking

There are many reasons to stop smoking before your operation. Smoking affects bone healing and increases your risk of complications such as chest infections and clots. If you smoke, ask your GP for advice on quitting.

Weight

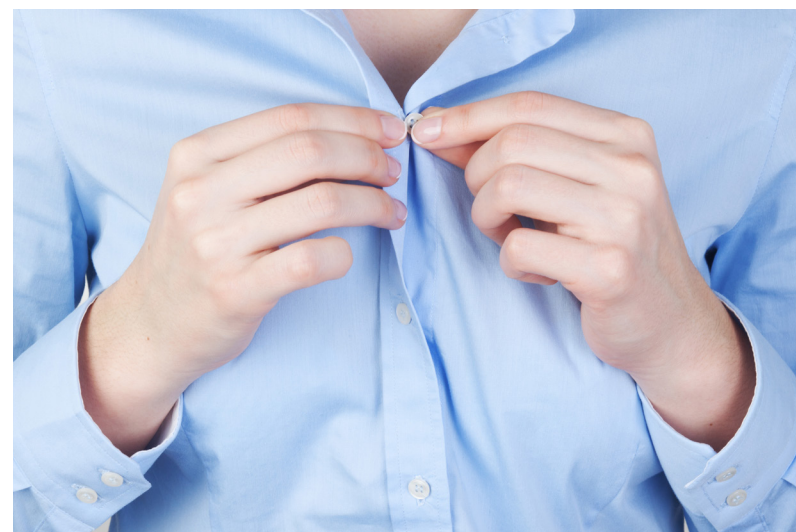
Being overweight or underweight before your operation can increase the risk of complications. Try to maintain a healthy weight that is appropriate for your height. Ask your GP for advice.

Home environment

As you will be required to wear a sling for a period of time following your surgery it is advisable to prepare your home environment in advance. This includes placing everyday kitchen items such as cups and cutlery at waist level to avoid reaching. Prepare frozen meals in advance or organise for someone to assist you with cooking and cleaning after your surgery.

Clothing

Button up or zip up blouses or shirts are easiest to manage following shoulder surgery. You will be able to carefully guide your operated arm into the sleeve. Organise these items of clothing in advance and bring them with you to the hospital. This includes button-up pyjamas.

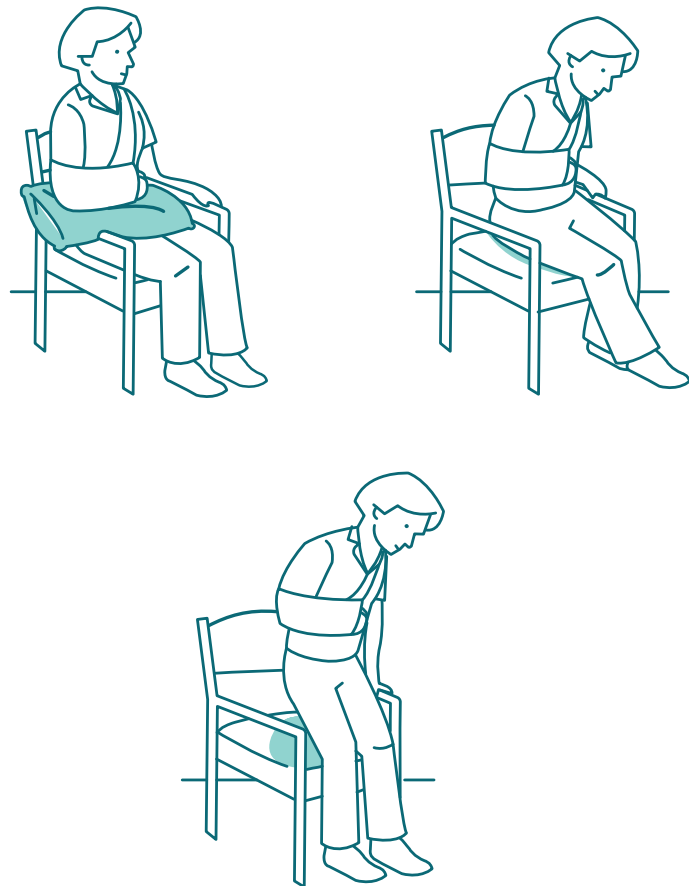


Getting around

After your surgery you will need to wear a sling for a number of weeks. Practice getting around your house using one arm only prior to surgery.

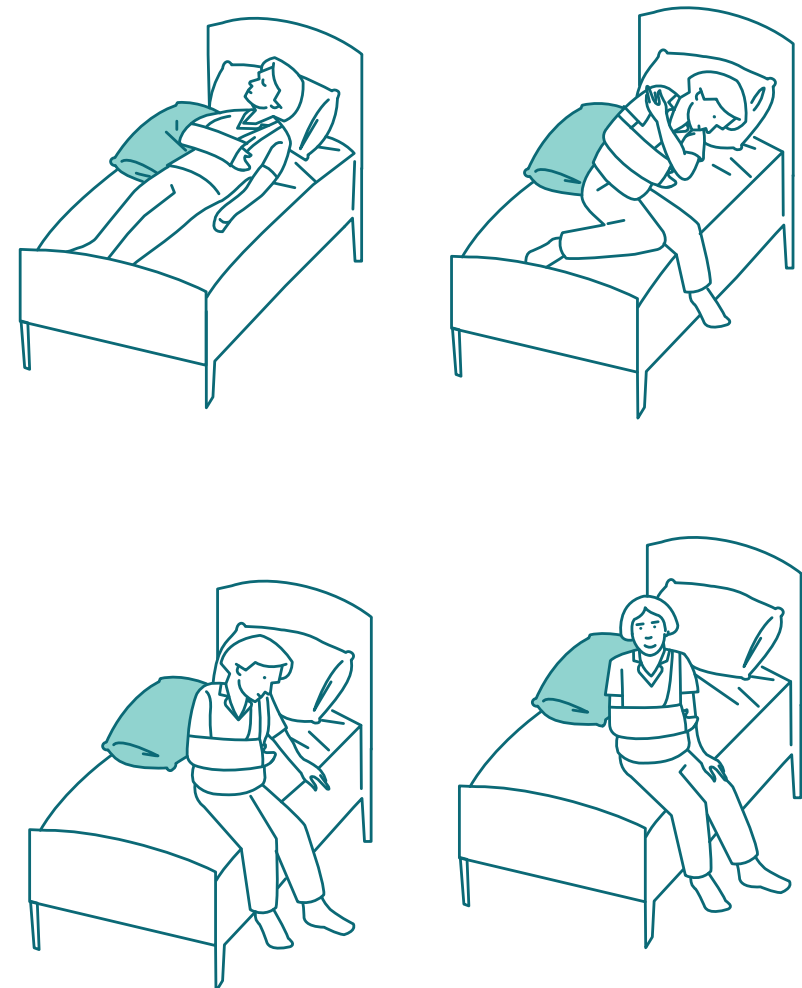
Getting up/down from a chair

Move to the edge of the chair using one arm only. Lean forward and stand up, pushing through your legs and one arm only as required.



Getting in/out of bed

Practice getting out of bed without using one arm, imagine your operated arm is in a sling and roll to the opposite side. Push yourself up into sitting using your good arm.



Before your surgery

You may receive a pre-operative phone call or attend the pre-admission clinic. At this appointment you may have a medical check-up. Your nurse and physiotherapist will also ask questions about your living arrangements. They can then help you to decide what you need and advise you how to organise it.

Generally most people go directly home from the hospital 2 to 3 days after their surgery and do not require convalescence. However, discuss this with your physiotherapist during your pre-admission appointment.

What to bring to hospital

- **Clothes – button up blouses/shirts, zip-up fleeces/jackets**
- **Button up pyjamas**
- **Mid-calf length, lightweight dressing gown**
- **Comfortable walking shoes.
Backless shoes or slippers are NOT advised**
- **Medication please bring your medication including any herbal preparations and a copy of your prescription for your current medication**
- **This booklet**

Valuables

We request that you should not bring articles of value or large amounts of cash into the hospital

Hospital care

Anaesthetic

Your surgeon and anaesthetist will choose the best anaesthesia for you. You will be under general anaesthetic, this means you will be asleep for your surgery. Sometimes a nerve block anaesthetic may also be used, this makes the arm and shoulder numb for a short period of time. No matter what type of anaesthesia you have, you will not feel the surgery.

The Operation

The operation will take approximately 90 mins.

Pain Relief

You will have some pain, swelling and bruising in the soft tissues around your shoulder. The nursing staff will give you medication to keep the pain to a minimum. You will also be provided with a shoulder cryocuff which uses ice to help reduce pain.

Ice

Cooling your shoulder with ice reduces pain and prevents swelling, which can cause stiffness and reduce mobility of the joint.

You will be given a reusable icepack called a cryocuff in the hospital, your physiotherapist will show you how to use it. You may need assistance to apply and remove the icepack.

You will be able to take this icepack home and place it in the fridge to keep it cold. You can use the ice every hour for 10 to 15 minutes. Ensure you do not apply ice directly to the skin.

Please Note : Do not take home the bucket attached, you will only require the shoulder cuff.

Exercises

Your physiotherapist will demonstrate your exercises to you after your surgery. These vary depending on your surgeon and type of surgery. It is your responsibility to complete these exercises in the hospital and at home. These exercises can be progressed by a physiotherapist as an outpatient.

Sling

A sling will be placed on your arm after your surgery before you wake up. Your physiotherapist will show you how to take on and off the sling before you go home. Your surgeon will determine how long you will need to wear your sling.

Positioning your arm

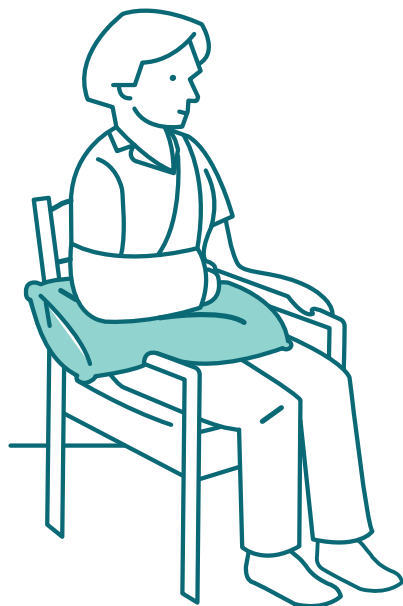
Standing

The sling should be positioned so that it is taking the weight of your arm comfortably. Your physiotherapist will fit your sling for you and show you how to put it on and take it off. Remember your elbow should fit right into the corner of the sling at an angle of 90 degrees.



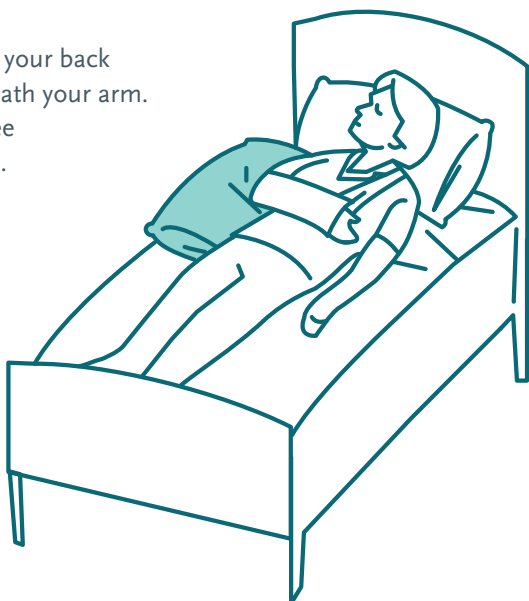
Sitting

When sitting in a chair, position your arm with pillows so that it is supported.



Lying

When you are lying on your back place a pillow underneath your arm. Ensure that you can see your elbow at all times.



Showering/washing

A waterproof dressing will be applied to your wound site. It's easiest to use a walk-in shower at first. When showering you may remove your sling. To clean under your arm, lean forwards at the waist and allow your body to move away from your shoulder.

DO NOT lift your arm.



Getting Dressed

You will need to wear button up blouses/shirts or zip up fleeces/jackets. Take your sling off to get dressed and reapply your sling afterwards. Ensure you place your operated arm into the sleeve first.



You may need to wear compression socks that help reduce your risk of DVT (deep vein thrombosis) – you will need assistance to get these on and off.

Precautions

Do not

- Do not Allow your arm to slip backwards – ensure you can see your elbow in front of you at all times
- Do not Remove your sling other than to complete exercises or for washing under the arm
- Do not Lift/carry items with your operated arm
- Do not reach your hand behind your back/neck eg to reach into your back pocket or to open or close your bra strap

Do

- Position your arm as shown in lying and sitting for support
- Wear your sling correctly and for the amount of time advised by your surgeon
- Wear your TED white compression stockings for the amount of time advised by your surgeon
- Complete your exercises daily as shown to you by your physiotherapist

Going home

Length of stay

Most people are able to go home 2 to 3 days after surgery.

Follow-up physiotherapy

Complete your exercises provided by your physiotherapist 3 times per day. Your physiotherapist or surgeon will advise you on when to attend physiotherapy as an outpatient.

Activities

Ask your surgeon for advice as to when you can return to driving, sports, hobbies, travel and work as this will depend on your procedure.

*Peace of mind is an important
component of healing*



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