



# Arthroscopic Subacromial Debridement Surgical Treatment of Irreparable Rotator Cuff Tears

## Pre-Operative Patient Information

### Diagnosis

Your shoulder pain arises from a problem in the rotator cuff tendons. The tendon is a thick, cord-like structure that allows muscles to connect to bones. In the shoulder, these tendons are called the rotator cuff. Rotator cuff tendons pass between two bones, the acromion and the humerus. The space is small and, normally, the tendons pass through as the arm is raised and rotated. With repeated overuse, a single injury or even the wear and tear of age, the tendon increases in size and becomes pinched or impinges between the two bones.

The process can occur slowly over time, and the damage may be so severe that repair of the tendons is impossible. Pain is caused by bursitis, inflammation, bone spurs and scar tissue.

### Why Surgical Treatment is Recommended

Shoulder surgery is medically indicated based on the details you provided, your physical examination and a review of X-rays or other tests. Persistent pain that interferes with your daily activities, work or sports is an indication for surgery.

Current medical knowledge indicates that the problem will likely continue. Your pain may become increasingly severe over time. It's also possible that the problem may remain static, or even improve with time. However, this does not seem likely in your case.

### Alternative Treatment Options

While we believe surgery is the best course of action, it is important to note that other treatment options are available. These range from simply living with the condition to physical therapy exercises, medication or injections. While any of these options may be successful in your situation, their reliability is uncertain.

### The Procedure

Your surgeon inspects the shoulder joint, ligaments and tendons and uses small, motorized instruments to remove inflamed or scarred tissue. The doctor uses a special instrument to remove any portion of the bone causing pressure on the tendons. Bone and scar tissue removal increases the space through which the tendons pass and allows recovery in 80 percent of patients.

We use an arthroscopic technique to perform this procedure. Instead of making a large incision, we use two or three small (approximately 1/2") incisions. We insert the arthroscope through one incision to look inside your shoulder. We then insert special instruments through the other incisions to allow removal of scar tissue and bone spurs.

Please note that you will receive, and be required to sign, an operative permit describing your treatment, including debridement.

### Anesthesia

General anesthesia is necessary for this type of surgery. It is the only reliable method that allows us to work deep inside your shoulder. The anesthesiologist also injects a type of Novocain around the nerve to help decrease pain in your shoulder after surgery.



## What to Expect Post-Op

You awaken in the recovery room following surgery. An attached ice pack helps control any pain and swelling. Although nothing will completely eliminate your pain, medication and the ice pack help keep you as comfortable as possible. This is an outpatient procedure, and you are able to go home the same day.

## Potential Complications

Because shoulder surgery is a complex and delicate process designed to repair damaged structures deep inside the body, complications are possible. Although rare, the most common complication involves injury to nerves around the shoulder. This occurs in less than two percent of patients. It is generally caused by pressure and usually goes away within two days to six weeks. Permanent injury that results in decreased use, function or feeling can also occur, but it is exceedingly rare. Infection occurs in less than one out of 200 patients and may require antibiotics or surgery.

## Success Rate

No shoulder operation is 100 percent successful for every person, but our procedures are reliable and help to restore potential function in your shoulder. This type of surgery is successful approximately 80 percent of the time. The operation is most successful at relieving pain. It's harder to accomplish the return to vigorous overhead use of your arm. Whether or not you return to your previous level depends on the damage to your shoulder, how well it heals, how well you rehabilitate and how strenuous your desired level of work or sports. Because of so many variables, we can make no guarantees other than to assure you that we will deliver the best medical care possible.

## Pain Medication

You will receive a prescription for pain medication, which you may have filled at the pharmacy of your choice. Take the medicine as directed and as needed for pain. You may find that, after the first day, simple rest, arm repositioning and an ice pack effectively control your pain. Should you need more medication, have your pharmacy call our office before 4 p.m. for a prescription refill. Note that we cannot refill narcotic medication on weekends. One of our physicians is available 24 hours a day, 7 days a week, but we ask that you restrict any after-hours or weekend calls to emergencies only.

## Returning to Normal Activity

You will be able to use your fingers, wrist and elbow immediately after surgery. You may bathe with regular soap and water 24 hours following the procedure, but be sure the surgery site or bandage does not get wet. You may shower normally after your first post-op visit. Do not change your bandage before then, unless instructed to do so by our office. You may gently use your arm in front of your body as soon as possible. It is OK to walk outdoors, write, cook and drive an automatic-shift car the next day. But, remember, you may not drive while you are taking pain medication. Let pain be your guide when using your arm for various movements and activities. If a motion or activity is painful, stop. Otherwise, gradually resume your normal activities. Try to use the ice pack for one hour, four times a day while you are at home. Do not wear any type of sling when you are outside.

## Returning to Work

While we are unable to offer fixed rules, we can provide the following guidelines for easing your return to work. For most sedentary jobs, we recommend taking one week off following the procedure. You may begin waist-level work or lifting of five to ten pounds a week after surgery, but be sure to avoid heavy lifting, pushing, pulling and carrying. Heavier lifting and work at or above shoulder level may begin three months following surgery. You will generally need six to twelve months before recovery is complete.

## Rehabilitation

We typically recommend physical therapy after shoulder surgery to help strengthen your shoulder and restore motion. Once your surgeon recommends the appropriate type and level of therapy, your therapist provides necessary materials and instruction. You may walk and ride a stationary bicycle within one week after your surgery. You may resume jogging, bike riding and similar activities once you feel comfortable. You may swim and play tennis (ground strokes only) one to two months after surgery. The return to overhead throwing and tennis strokes can require six to twelve months of rehabilitation.

## Post-Operative Visits

We schedule your first post-op visit for three to four days after surgery to examine the incision and remove your bandage. At that time, we provide additional instructions for exercises and discuss your permitted activity level. You will be allowed more vigorous use of the shoulder six weeks after surgery. Office visits occur at three and six months following surgery, if necessary. At each visit, we evaluate your progress and share specific exercises designed to maximize motion, strength and coordination. Your surgery outcome depends on a continual evaluation process. Regular office visits are critical to your care. And, it is important that you, your surgeon and your therapist work together.

## Surgical Costs

Because insurance benefits vary and there are no fixed rules for coverage, be sure to check with your insurance provider before your shoulder surgery. Please direct any questions about hospital, X-ray, laboratory and anesthesia charges to the hospital billing office. We will be happy to supply any information you need. We will also contact your insurance carrier, but doing so does not guarantee payment.

## Pre-Operative Testing and Evaluation

Although we're operating on your shoulder, your entire body reacts to the anesthesia and surgery. Please see your family physician within seven days of your scheduled procedure for a pre-op examination. The surgical facility will contact you to schedule required testing based on your age and medical history. You will also need to see an anesthesiologist before surgery. He or she will inform us of any medical issues.

## Scheduling Surgery

Contact us at (513) 985-3700 Monday through Friday from 8 a.m. to 5 p.m. We will make every effort to schedule your surgery at a time that is convenient for you.