

SHOOLDER SORGERT . IIIItiai post	operative renabilitation
Name:	Date:
Procedure:	

This handout describes details of the early post-operative care of your shoulder. The rehabilitation of your shoulder after surgery is essential for the success of your treatment. Your surgeon and physiotherapist will advise you on the specifics of your rehabilitation, but the ultimate responsibility to exercise consistently is yours.

The main goals of rehabilitation in the first two weeks are:

- Control pain and inflammation
- Allow the surgical wounds to heal properly
- Commence passive exercises to minimize the side effects of immobilization

Control of pain and inflammation

During the early post-op period, you will experience some discomfort in your shoulder. To control the pain and inflammation:

If you wish, you can use an cold pack, or bag of crushed ice wrapped in a damp towel, placed over the front of the shoulder for 15 minutes each hour or so to help with your discomfort. After first few days, the frequency of icing can be reduced to every 2-3 hours or so.

You will receive a prescription for pain relief prior to discharge from hospital. As the local anaesthetic starts to wear off, start taking the pain-killers. Don't wait until the pain is really severe to take pain relief. It is easier to keep pain under control, than to get it back under control once it is severe.

Post-operative wound care

The outer dressing can be removed 2 days after your surgery.

The inner dressing can be left undisturbed until being seen in the 1st post-operative clinic. The inner dressing is waterproof and may be gently showered over, then patted dry from 3 days after surgery. Ensure you keep your armpit clean.

Out of town patients: Your first follow up will be a phone consult with our clinic nurse. Please attend your GP or GP nurse the day before this appointment to get the wounds checked and sutures trimmed / removed.

Your next clinic appointment is:

Contact the clinic if you have a significant amount of **ongoing oozing** or **bleeding** after the first 24h, or if you have **worsening swelling and pain** in spite of resting, taking your painkillers and decreasing exercise intensity.



Sleeping Recommendations:

- Wear your sling / brace sleeping until you are seen at a follow up clinic, unless told otherwise.
- It may be easier sleeping on you non-operated side with a pillow between your knees.
- If you are not required to wear the brace, use one or two pillows between your forearm and body to help support the operated arm.





Mobilization Exercises:

After surgery, your shoulder can quickly become weak and stiff. Start gentle mobility exercises on the first day after surgery, unless told otherwise.

Do your exercises at least 2 times daily.

Your exercise program is customised for your surgery. The specific exercises you should do are indicated below and described in the following pages:

1.	. Neck and shoulder blade exercises		
2.	Elbow exercises:	Normal protocol 🛚	Biceps protocol 🛚
3.	Wrist and hand exercises		
4.	External rotation		
5.	Pendulums		
6.	Elevation		



1. Neck and shoulder blade exercises

Maintain a full range of neck movement (ROM) in each direction. Tilting back to the ceiling, then chin down onto chest. Rotating your neck in left and right, tilting sideways to bring your ear down to the shoulder on each side.

Shoulder blade motion

The muscles around the scapula (shoulder blade) are important in helping to position and stabilize the shoulder. After surgery, there is a tendency to hunch the shoulder blades up and forwards. Concentrate on keeping your shoulders *back* and *down* while wearing the sling.

Shoulder circles

Do these with the sling on or off.

Shrug the shoulders forward, up, back and then down in a circle.

Repeat with both forward and backward circles 10 times in each direction. 3 times daily at a minimum







2. Elbow exercises

A. Normal protocol

Slip your forearm out of the sling without moving your shoulder.

Gently allow the arm to straighten out under the effect of gravity. Let it hang as straight as you comfortably can for 30 seconds, then bring it back up. Repeat 3 times.

B. Biceps protocol

Protect the biceps and labrum by avoiding using the muscles to actively bend the elbow. Sit beside a table and rest your forearm on the table palm down. Straighten the elbow to a maximum of 30°. Use the other hand to bend the elbow back up to 90°, or further if comfortable. Repeat 10 times.

3. Wrist and hand exercises

Work on fully extending your fingers, then making a fist and squeezing. Do 3 sets of 10 repetitions every hour. Also make gentle wrist movements in flexing, extension and side to side motions while wearing the sling.

4. External rotation

Lie on your back. Hold a pole (eg broom handle or ski pole) with your arms by your sides and elbows bent to 90° . Support the operated arm (ϕ) throughout the movement on a rolled towel (about 15cm high). With your uninvolved arm, gently rotate the operated arm outwards, as shown by the arrow. Do not let your elbow move away from the side of your body.

Stop when you begin to feel significant stretching or pain in the shoulder. Hold for 30 seconds, then gently release.





Max allowed motion:

0° □

45° □

Full □







5. Pendulums

Stand behind a chair or support and lean forward.

Gently let the involved arm hang down freely and relaxed

Swing your arm forwards, backwards, sideways and in circles, using gravity to help you.

Initially perform this exercise for 1-2 minutes, 3-4 times (rest between sets). Eventually you will be able to let the arm hang at 90°



Lie on your back, bend your knees and keep your back flat throughout the movement. Don't arch your back.

Use the good arm to grasp the operated one. Gradually lift your involved arm upwards over your head. This movement may be tight, but should not be too painful.

Aim to get to at least 90°

Hold for 30 seconds and then slowly lower the arm to the starting position.



