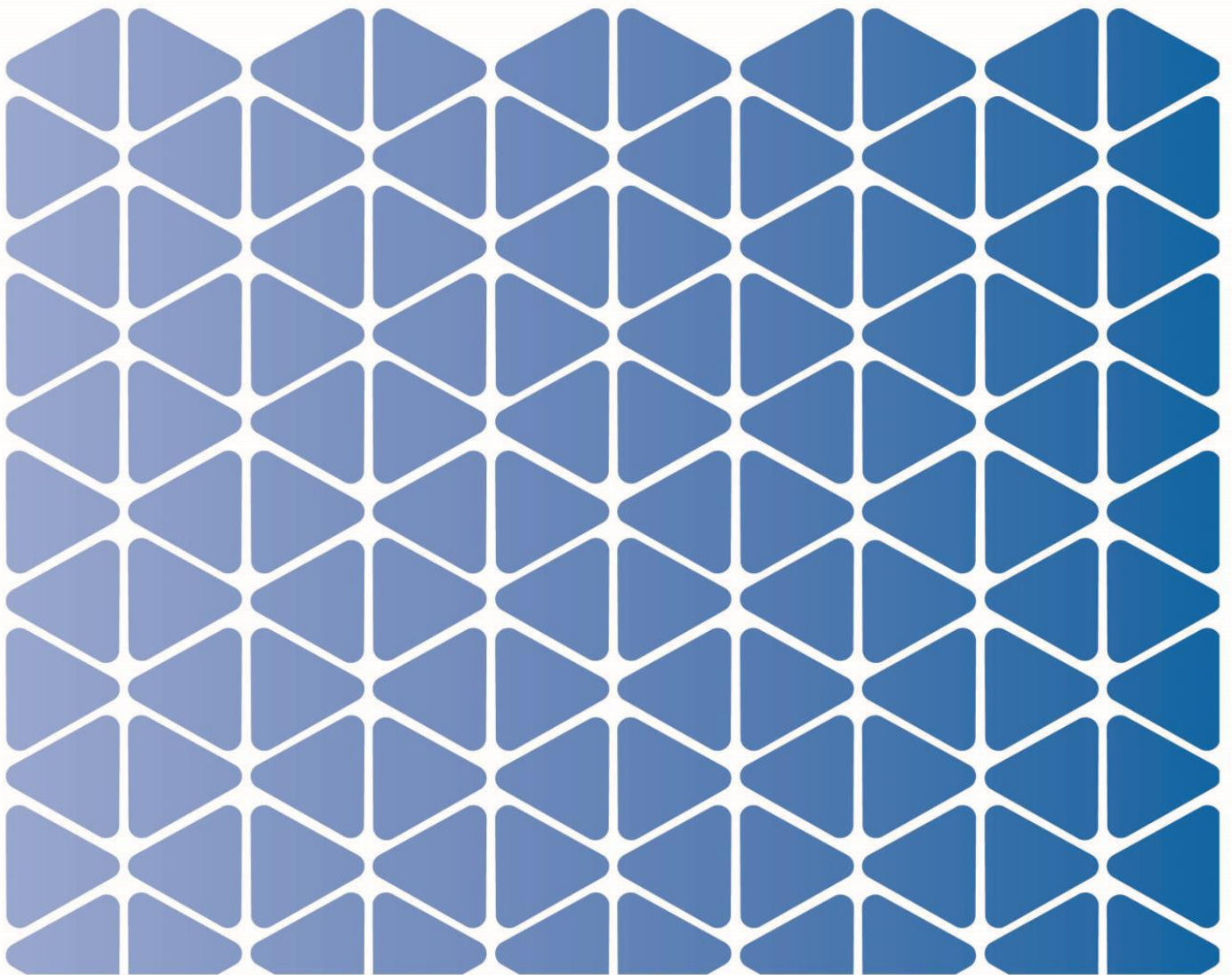




PATIENT INFORMATION

ADVICE & EXERCISES FOLLOWING ROTATOR CUFF REPAIR

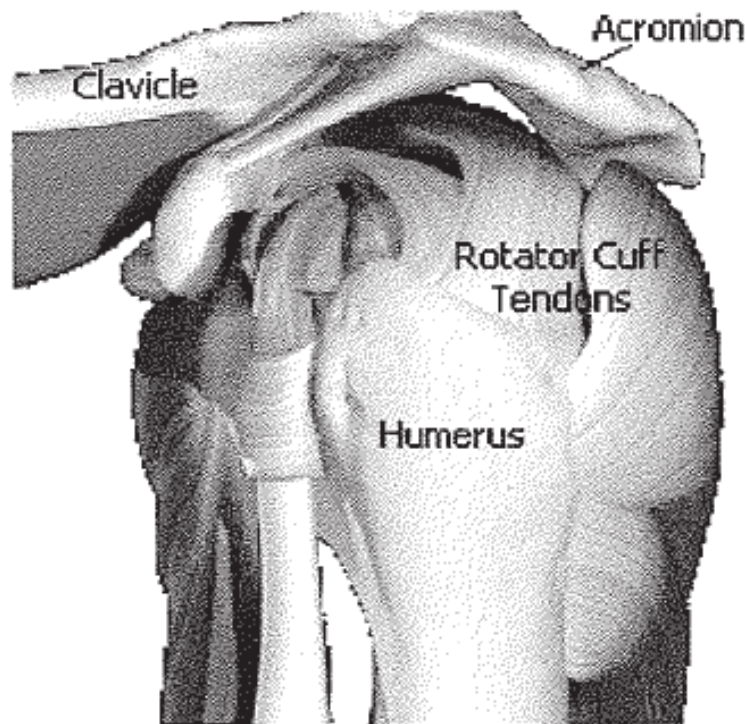


DEFINITION

The rotator cuff is a group of tendons that connect 4 muscles of the upper shoulder to the bone.

They help lift and rotate the humerus and stabilise the shoulder joint.

A rotator cuff repair involves stitching a torn tendon back onto its attachment to the arm bone (humerus). This may be performed either through keyhole surgery (arthroscopy) or open surgery.



DRESSING

When you come back from theatre, there will be a large bandage over your shoulder.

Under the bandage there will be dressings over the wounds.

GENERAL ADVICE, RISKS and BENEFITS

- You are advised to do exercises as instructed, otherwise your shoulder may become stiff.
- You will be given appropriate pain killers and you should take these as directed to allow you to be comfortable enough to do your exercises.
- You will be given a sick note for work. The length of time you are off work will depend upon your job. If you require further sick notes, please see your GP.
- When you return from theatre, you may have an immobiliser fitted, to keep your arm close to your side. You are advised to use the shoulder immobiliser as instructed, failure to do so may rupture the rotator cuff repair.

Below are instructions on the shoulder immobiliser and its application:

Place arm in sling and ensure the elbow is held securely in place.



Place the strap over the shoulder opposite the injured arm and loop through buckle by wrist.



Take the immobilisation strap (if required) and attach it to the front of the sling at the elbow.



Bring the immobilisation strap around the back of the waist and fasten into the 'D' ring (next to your stomach)



While in the immobiliser, you need to take care with underarm hygiene, wash and dry your underarm daily without lifting your arm away from your side. You can do this by loosening or removing the waist strap then leaning forward so that your arm moves away from your body. You should continue to wear the immobiliser until your consultant or physiotherapist says you may discontinue its use.

EXERCISES

The exercises that you can do after your operation will depend on the extent of the repair to the rotator cuff. Rotator cuff repairs are categorised into:-

- Small
 - Medium
 - Large
- You will be told which repair you have had

All patients can do exercises 1 - 4. If you are in an immobiliser, loosen it to do the exercises.

Your physiotherapist will guide you on other exercises in this booklet. Rehabilitation is adapted to the individual and will depend on size of tear, quality of patient's tissue and lesion repaired. The first stage of rehabilitation will concentrate on range of movement, followed by strengthening work.

You will be referred for out-patient physiotherapy at your local hospital.

1. Stand

Bend your elbow and then straighten your elbow.

Repeat times



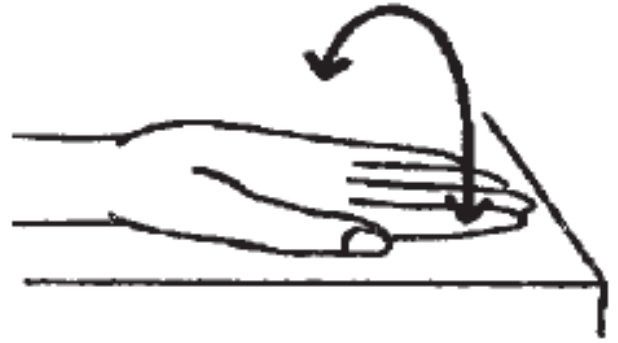
2. Bend and then straighten your wrist.

Repeat times



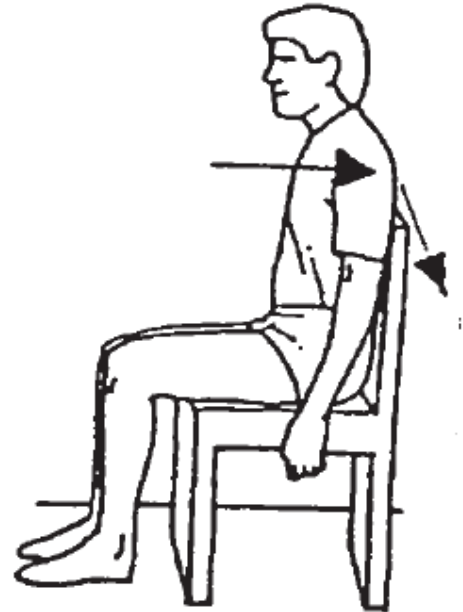
3. Alternately turn palm up and down keeping elbow still.

Repeat times



4. In sitting, bring your shoulder blade, back and down towards your opposite hip. This is a small movement; you should not brace your shoulders back hard. Hold for 5 seconds.

Repeat times



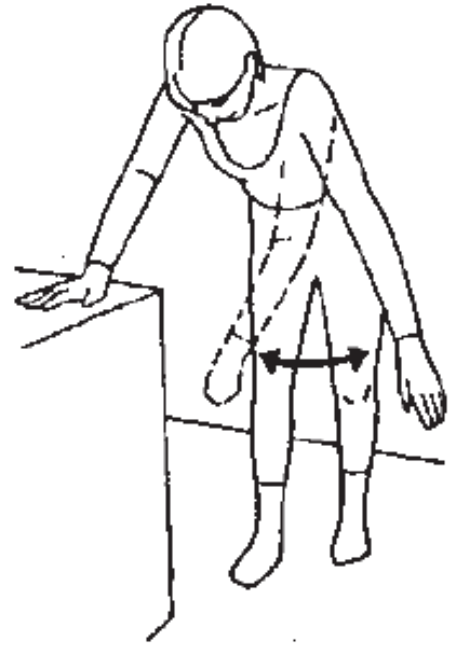
**ONLY DO THE FOLLOWING EXERCISES IF INSTRUCTED BY
PHYSIOTHERAPIST / CONSULTANT**

5. Stand leaning on a table with one hand.

Left your affected arm hang relaxed straight down.

Swing your arm to your left and then to your right.

Repeat times

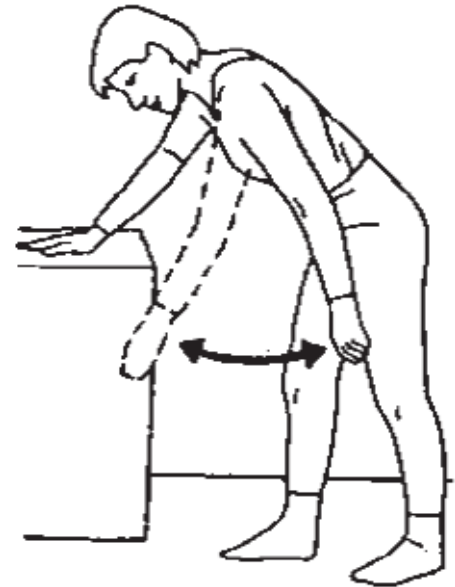


6. Stand leaning on a table with one hand.

Left your affected arm hang relaxed straight down.

Swing your arm forwards and backwards.

Repeat times



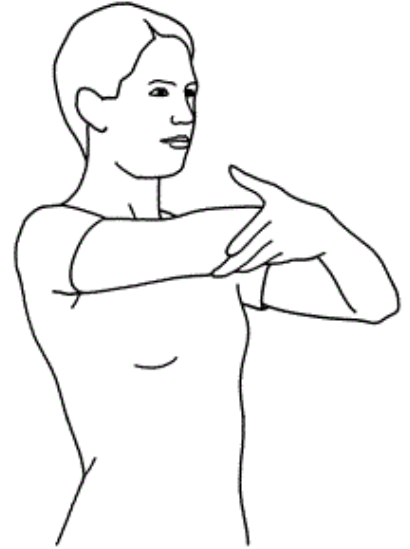
Only carry out the following exercises when instructed to by your physiotherapist

7. Stand or sit

Supporting the weight of your operated arm with your other arm.

Lift your operated arm upwards by using your other arm to take the weight as pain allows

Repeat times



8. Sit or stand

Support the weight of your operated arm with your other arm.

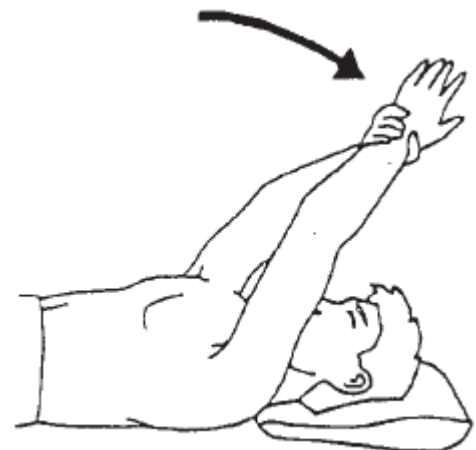
Lift your operated arm sideways by using your other arm to take the weight as pain allows.

Repeat times



9. Lie on your back with elbows straight, use your good arm to lift the affected arm up, keeping it as close to the ear as possible.

Repeat times



10. Stand and grip one end of the stick with the arm to be exercised. Lift the stick up sideways by assisting with the other arm.

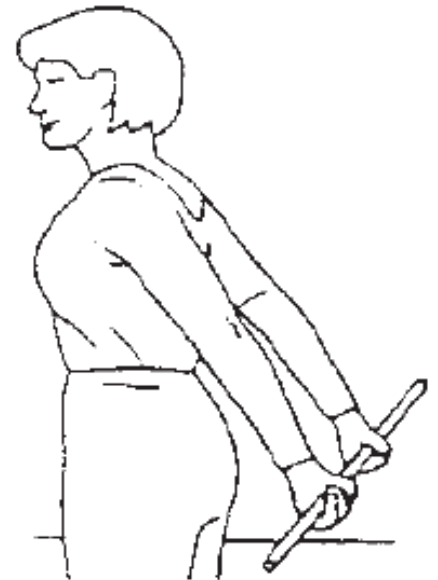
Repeat times



11. Stand with arms behind your back with your elbows straight.

Lift the stick upwards away from your body.

Repeat times



12. Stand with arms behind your back. Grasp the wrist of the arm you want to exercise. Slide your hand up the back

Repeat times

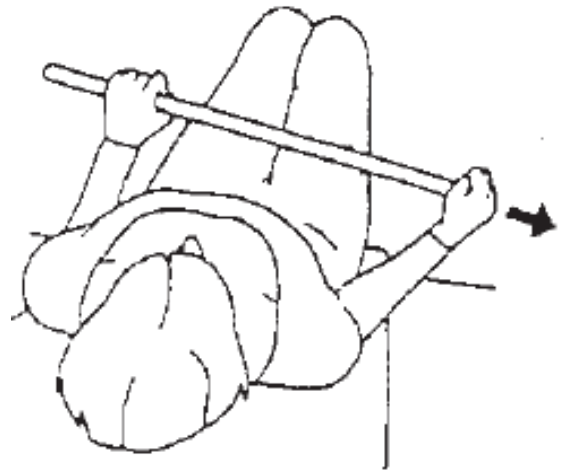


13. Lying on your back with elbows against your body and at a right angle.

Hold a stick in your hands.

Move the stick sideways thus pushing the arm to be exercised outwards.

Repeat times



ACTIVITIES

- Driving - 4-8 weeks dependent upon progress
- Swimming
 - Small tears 6 weeks
 - Large tears 12 weeks
- Golf - 3 months
- Lifting
 - Avoid heavy lifting for 3 months
 - after this be guided by your physiotherapist
- Return to work - Dependent upon occupation
- Sedentary job 6-8 weeks depending on size of tear.
 - Large tears at least 8 weeks
- Manual workers to be guided by surgeon.

QUERIES

If you have any queries about any of the advice contained in this booklet

OR

If you are unable to progress your exercises in accordance with the leaflet

OR

If you have persistent pain, swelling or worsening of your symptoms. Please contact the Physiotherapy Department at the hospital where you had your operation between 8.30am - 4.30pm Monday - Friday:-

Worcestershire Royal Hospital

Tel: 01905 760622 / 760187

Alexandra Hospital, Redditch

Tel: 01527 512114

Kidderminster Hospital

Tel: 01562 513066

If you have any concerns about your shoulder you can also contact the Day Surgery Unit, Accident & Emergency or your GP.

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PET@nhs.net

Opening times:

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.