

Patient Information Sheet

Subacromial Decompression and AC joint excision

What does the operation involve?

This operation is usually performed using keyhole surgery, otherwise known as 'arthroscopy'. The aim of the surgery is to address pain in the shoulder which has persisted, despite lengthy engagement in Physiotherapy and steroid injections. The procedure involves the removal of any debris/irregularities on the underside of the acromion (the bony shelf above the shoulder joint) which may be irritating your rotator cuff tendons. On occasions, part of the acromioclavicular (AC) joint (the joint between the shoulder blade and the collar bone) and the bursa (small fluid filled sac) may be removed if this is felt to be contributing to your symptoms.

It is essential to fully engage in the rehabilitation process and adhere to the advice given by your health professional to allow your shoulder pain to settle following surgery and to ensure the best long term outcome.

The operation may also incorporate other associated procedures, but this will be fully discussed with you by your surgeon.

Immediate care after your operation

- Your arm will be placed in a sling **for comfort only** and this can be used for the duration of the nerve block and for short periods to manage your pain, thereafter.
 - Information regarding the **best way to put your sling on and take it off** is available online by visiting policyonline.nhslothian.scot/patientinformation and searching 'Use of a Shoulder Sling' or by scanning the QR code.
- **Prolonged use of the sling is not encouraged** as this may cause stiffness in your shoulder, elbow and hand.
- You are permitted to **use your shoulder below shoulder height** following surgery and to progress this as pain allows.
- **Repeated overhead movements should be avoided** in the early stages to allow your shoulder pain to settle.
- **Further instructions** will be provided by your surgeon to the Physiotherapy team, should your surgery have involved any other procedures requiring a different post-operative approach.
- **Wound care** – Please refer to Arthroscopic Shoulder Surgery Patient Information leaflet available overleaf.
- **Pain relief** – Please refer to Arthroscopic Shoulder Surgery Patient Information leaflet available overleaf.
- **Use of ice** - You can ice your shoulder for 15 minutes every 2-3 hours if you feel it is needed. The ice pack must be wrapped in a dishtowel to avoid ice burn. If icing your left shoulder, be aware of any dizziness or light-headedness. If this occurs, stop applying ice to shoulder.



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- **Arthroscopic Shoulder Surgery Patient Information Leaflet** – Please scan the QR code or visit the below website to access the leaflet.

www.admin.rightdecisions.scot.nhs.uk/media/o3ahp4kh/arthroscopic-shoulder-information.pdf



Physiotherapy

Most patients will be referred for post-operative physiotherapy, however, this will be at the discretion of your surgeon and your individual needs.

Early exercises following surgery

Maintenance exercises whilst you are immobilised in your sling following surgery are an extremely important part of your early rehabilitation. It is essential that these are performed regularly, approximately 4 times daily.

A detailed description of these exercises can be found online by visiting policyonline.nhslothian.scot/patientinformation and searching 'Early Exercises following Shoulder Surgery' or by scanning the QR code.



Expected timescales

It is important to note that these are for guidance only and can be discussed with your health professional, as required.

- Use of the affected arm for light activities below shoulder level for **12 weeks**.
- Return to work **as pain allows**.
- **Legally, you must not drive when in a sling.** Once you have the required movement and strength, you must self declare fitness to drive and only drive when you are able to safely control the vehicle and perform an emergency stop.
- Return to sport **as pain allows**.

Expected follow-up with your health professional

You will be followed up by the Orthopaedic team at the following points:

- You will commence physiotherapy, if requested by your surgeon, approximately, **1-2 weeks** following your surgery.
- You will be reviewed in Orthopaedics at **8 weeks** by your surgeon or a specialist physiotherapist.
- You will be reviewed by your surgeon **6 months** following your surgery.

Useful phone numbers

NHS Lothian switchboard: 0131 536 1000