

# Patient Information Sheet

## Shoulder Stabilisation

### *What do I need to know?*

#### What does the operation involve?

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The aim of the surgery is to address instability within the shoulder joint. The two main types of operation are soft tissue (keyhole) stabilisations or a bone block (Latarjet) procedure.

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

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- Your arm will be **immobilised** in a sling for 4 weeks, permitting no active movement away from your body. This may be longer if requested by your surgeon.
  - Information regarding the **best way to put your sling on and take it off** is available online by visiting [policyonline.nhsllothian.scot/patientinformation](http://policyonline.nhsllothian.scot/patientinformation) and searching 'Use of a Shoulder Sling' or by scanning the QR code.
- Your **sling must be worn overnight**. If you are lying on your back to sleep, you might find it comfortable to place a towel or pillow under your upper arm for support.
- You are permitted to take your sling off only for **personal care** and at intervals during the day to allow you to perform your **elbow, wrist and hand exercises** (see below).
- If your biceps tendon has been involved in the procedure, you may be advised to avoid bending your elbow against resistance for the first 8 weeks, or as instructed by your surgeon.
- **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 below.
- **Pain relief** – Please refer to Arthroscopic Shoulder Surgery Patient Information leaflet available below.
- **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.
- **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](http://www.admin.rightdecisions.scot.nhs.uk/media/o3ahp4kh/arthroscopic-shoulder-information.pdf)



#### Physiotherapy

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

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#### Early exercises following surgery

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Maintenance exercises whilst you are immobilized 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](http://policyonline.nhslothian.scot/patientinformation) and searching 'Early Exercises following Shoulder Surgery' or by scanning the QR code.



#### Expected timescales

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**It is important to note that these are for guidance only and your physiotherapist will progress your function depending on your individual needs and progress through your rehabilitation.**

<b>Week 0-4</b>	<ul style="list-style-type: none"><li>• Sling to be worn during the day and night to ensure the elbow is supported. It may be removed when seated with the arm resting on your lap to reduce pressure around your neck</li><li>• Exercises of the elbow, wrist and hand permitted</li><li>• Use the affected hand to perform simple task (text/type/read/write)</li><li>• Sedentary work can begin</li></ul>
<b>Week 4-6</b>	<ul style="list-style-type: none"><li>• Gradual Removal of the sling</li><li>• Gentle movements of the shoulder as directed by your Physiotherapist</li><li>• No loading/lifting or pushing up from a chair</li><li>• Movements below shoulder height only</li><li>• Use of arm for light activities only</li></ul>
<b>Week 6-12</b>	<ul style="list-style-type: none"><li>• Gradual increase in range of movement as guided by your Physiotherapist</li><li>• Graduated resisted exercises below shoulder height can be started, as guided by your Physiotherapist</li></ul>
<b>Week 12 onwards</b>	<ul style="list-style-type: none"><li>• Exact timescale should be guided by your physiotherapist</li><li>• Return to swimming after <b>12 weeks</b> (breast stroke may be slightly earlier)</li><li>• Manual work can begin at <b>3-4 months</b></li><li>• Return to golf between <b>3-6 months</b></li><li>• Contact sports should be discussed with your surgeon at your 6 month review. Commonly this will be around the <b>6-12 months</b> stage.</li></ul>

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#### Driving:

**Legally, you must not drive when in a sling. After 6-8 weeks you must self declare fitness to drive and only drive when you are able to safely control the vehicle and perform an emergency stop.**

#### Expected follow-up with your health professional

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

- You will commence physiotherapy, approximately, **4 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** after your operation.

#### Useful phone numbers

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NHS Lothian switchboard: 0131 536 1000