



MR GIUSEPPE SFORZA
CONSULTANT ORTHOPAEDIC SURGEON



Anterior subacromial decompression +/- acromioclavicular joint excision (+/- excision of calcific deposits)

The anterior subacromial decompression is designed to improve pain and function in cases of mechanical impingement. The operation aims to increase the size of the subacromial space and reduce the pressure on the tendon. It involves cutting the ligament and shaving away the bone spur on the acromion. The acromioclavicular joint excision is designed to improve pain and function in cases of acromioclavicular joint arthritis or dysfunction. The procedure shaves the distal end of the clavicle, aiming to remove the painful and damaged joint without destabilising it. Calcium deposits in the rotator cuff are surgically removed to improve pain and function.

INPATIENT GUIDELINES:

Physiotherapy follow up appointment: an appointment should be arranged to attend a post-operative physiotherapy session in the outpatient physiotherapy department 1 week after the surgery. Further follow up physiotherapy sessions will be arranged by the physiotherapist

!!!!ALWAYS CHECK AN APPOINTMENT HAS BEEN MADE!!!!

If this appointment has not been made an appointment needs to be made as soon as possible.

Clinic follow up appointment: 3 weeks, 3 months, 6 months

Sling use: Master sling with body belt can be removed within 2 – 4 days.

Contraindications/ risks: Advise patient to avoid repetitive or sustained overhead activity at or above shoulder height for 3 months

Discharge summary/ Ward physiotherapist responsibilities:

Ensure patient has a physiotherapy and clinic appointment arranged.

Issue patient with advice on analgesia, contraindications and sling use (2 – 4 days)

Teach day 1 – week 3 exercises as per protocol

Day 1

- Master sling fitted in theatre
- Ice packs applied to shoulder
- Ensure physiotherapy and clinic appointment arranged
- Advise patient on analgesia use, contraindications and sling use.
- Begin shoulder girdle, elbow, wrist and hand mobility exercises and postural awareness

Day 2 or on discharge

- Continue to wear Master sling
- Continue to use ice packs
- Teach axillary hygiene
- Continue shoulder girdle, elbow, wrist and hand mobility exercises and postural awareness
- Begin gentle pendulum exercises in forward leaning position
- Begin passive flexion, abduction, external rotation, internal rotation in abduction and hand behind back **DO NOT FORCE OR PUSH INTO PAIN**

Week 1 – 3+ Patient will attend a physiotherapist led group

- Gradually wean off sling
- Issue analgesia advice, pacing education and sleep strategies
- Encourage progressive increase in ADL's and advise on return to work
- Continue shoulder girdle, elbow, wrist and hand mobility exercises
- Continue pendulum exercises
- Progress passive exercises, to active assisted, then active **DO NOT FORCE OR PUSH INTO PAIN**
- Begin rotator cuff isometric exercises
- Begin scapular stability exercises
- Progress gradually rotator cuff exercises from isometrics, to closed chain, to open chain
- Progress scapula stability exercises
- Progress return to sport, exercise and work
- Begin proprioceptive exercises and core stability work as appropriate

Should the patient fail to progress independently; physiotherapy treatment can be arranged. In these cases progression should be tailored to the individual patient and contraindications must be followed for the full 3 months.

The Consultant clinic follow up appointment is planned for 3 weeks, 3 months post-operatively but can be expedited if necessary.

Timings for returning to functional activities are approximate and will differ depending upon the individual. However, they should be seen as the earliest that these activities may commence:

Return to functional activities

Driving	1 - 2 weeks or when safe.
Lifting	As able.
Swimming	Breast stroke at 2 - 3 weeks, freestyle when able.
Return to work	Light work (no lifting) 10 days - 6 weeks. Medium work (light lifting below shoulder level) from 6 weeks Heavy work (above shoulder height) 3 - 6 months.
Golf	6 weeks (but not driving range).
Racquet sports	Sport specific training when comfortable Competitive play when able.

To book a consultation or an appointment with Mr Giuseppe Sforza please get in touch

<http://www.giuseppesforza.com/appointments/>

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