



ROTATOR CUFF REPAIR Preoperative Patient Information

What Is A Rotator Cuff Tear?

The rotator cuff is responsible for lifting and rotating your shoulder. When this tendon separates from your shoulder it is called a rotator cuff tear. Tendons are thick cord-like structures that connect muscles to bones.

How Does A Rotator Cuff Tear?

Rotator cuff injuries most commonly occur due to the wear and tear of aging. Often, what appears as a minor injury can cause the tendon to give way. On occasion, a single injury can cause the problem.

What Is A Rotator Cuff Repair?

Rotator cuff repair is a surgery performed to suture the torn tendon ends back to the bone. During surgery, the inflamed bursa or bone spurs that would delay tendon healing are removed and small screws are inserted into the shoulder with sutures attached to them. The sutures are then woven through the torn tendon reattaching it to bone. This surgery is performed using an instrument called the arthroscope.

Does Surgery Have To Be Performed?

Surgery is considered elective but most believe it is the best course of action. Other options include just living with the condition, physical therapy exercises, medications or injections. Depending on your conditions, any of these treatment options may be successful for your situation.

How Is Surgery Performed?

Most often surgery is performed on an outpatient basis and takes 1-2 hours to complete. You will then stay in the recovery room for 2-3 hours and can usually go home afterward. After surgery, your arm will be in a sling with an ice pack machine on top of your shoulder. Nothing can eliminate the pain completely. You will be sent home with medication, sling and the ice pack. These will control your pain and make you as comfortable as possible. You will need to check with your insurance company to see if the use of the ice machine is covered under your particular plan.

How Is Surgery Pain Managed?

Before surgery, you will meet an anesthesiologist who will talk with you about a shoulder injection that will decrease the pain after surgery. A general anesthetic is also used to allow us to work deep inside your shoulder. At your preoperative visit you will receive a prescription for pain medicine that should be filled so you have it ready after your surgery. When you need more medication contact your pharmacy and they will call the office so the prescription can be refilled. Please plan in advance when you think you will need more medication. It may take as long as 48 hours to have the prescription refilled and our office is not open after 5:00pm or on weekends.

When Do You Return To The Doctor's Office?

The successful outcome of your surgery is dependent on a constant process of evaluation that occurs during your office visits. This is not the type of surgery that can be performed without your cooperation. A successful result requires teamwork and this involves regular office visits with your surgeon and



physical therapist. Below is a rough timeline you will need to follow to achieve optimum results from your surgery.

- 1st visit - 1st day after surgery
- 2nd visit - 2 weeks after surgery
- 3rd visit - 6 weeks after surgery
- 4th visit - 3 months after surgery
- 5th visit - 6 months after surgery
- 6th visit - 12 months after surgery

How Is Your Shoulder Rehabilitated?

Your rehabilitation will start the afternoon following surgery. A device called the Continuous Passive Motion (CPM) chair will move your arm in the correct motion. You will use this machine at home for 2 weeks after the operation. The company that we use will deliver the chair to your home and pick it up when you have completed the 2-week exercise period. You will use the chair for one hour, 4 times a day and apply an ice pack for ½ hour after each chair session. The CPM chair is a more convenient and inexpensive way to rehabilitate the shoulder compared to going to a physical therapy facility. Please check with your insurance provider to see if the use of the CPM chair is covered by your health plan. During your 2 week post operative office visit, it will be determined if this is an appropriate time to arrange for physical therapy. If you are doing well then you will stop using the chair and the therapist will instruct you how to exercise your arm. You will still use the sling and should not raise your arm up or away from your side yet. You will then be seen at 6 weeks after surgery and you should be able to remove the sling. The physical therapist will then give you additional exercises to start raising your arm up on your own. At the 3-month visit, you will start the strengthening exercises. The above are guidelines and they will be adjusted for your individual rehabilitation based on the severity of the tendon tear and your progress at each office visit.

When Can You Return To Work?

There are no fixed rules for returning to work. What are described below are reasonable guidelines based on your activity levels and work demands. This information should help you and your employer ease your return back to the workplace.

For most sedentary jobs you should consider taking one week off from work. Upon your return, your arm will be in a sling for 6 weeks after surgery. You should be able to complete most administrative tasks as long as there is no lifting, pushing, pulling or carrying. You are **not** to raise your arm without help for the 6 weeks following surgery. This allows the tendon to heal in the best possible position. You may begin light duty work involving no lifting, pushing, pulling or carrying more than 1-2 pounds 6-8 weeks after surgery. You may work at waist level and lift 5-10 pounds 3-4 months after surgery. Most patients can tolerate occasional work at shoulder level 3-6 months after surgery. Returning to heavy lifting or overhead use may require 6-12 months.

Who Can You Contact For More Information?

You can contact Michele, my assistant, by telephone at (719) 365-1933.



ROTATOR CUFF REPAIR
Postoperative Patient Information

THE OPERATION: Your operation was performed through an instrument called the arthroscope. Bone spurs and scar tissue were removed and the torn tendon was sewn back to the bone with special bone screws.

PAIN: You will be given prescriptions for pain medication. Please have these filled at your local pharmacy or where your insurance plan has made arrangements. They may be taken every 4 hours for pain if needed.

ACTIVITY: You may bend and straighten your fingers, wrist and elbow as much as you desire. Do not raise your arm up or away from your body on your own. It is safe to write, eat and drive with your operated arm as long as there is no pain. Do not carry anything heavier than a cup of coffee with this arm.

SLING: A sling is necessary to support the arm. Wear it as much as possible even in public. When you are at home and seated you may remove the sling and support your arm on a pillow.

ICE PACK: The ice pack should be worn for 1 hour, four times a day for 3 days after surgery. If you are using the CPM chair, use the ice pack for ½ hour after each of your 4 daily chair sessions. If you have decided not to use the CPM chair, use the ice pack after each stick and pulley session. This will help reduce swelling and pain. After that you may wear the ice pack as much as you would like.

WOUNDS: The 3-4 small holes may be sore and swell and develop bruising over the next several days. This will go away and no special care is needed. Band-aids may be placed over the wounds for comfort.

BATHING: It is safe to take a shower or bathe 24 hours after surgery. To bathe, remove the sling and leave your arm by your side. To wash under your armpit, lean over and let the arm fall away from your body. **DO NOT** raise your arm! You may wash the incisions with regular soap and water. Your hand and forearm skin may be dry and peel due to the strong disinfectant soap we use at the time of surgery.

PRECAUTIONS: If you have a temperature, severe pain, or redness in your shoulder, please contact our office immediately.

FOLLOW-UP: Please call the office and ask for the appointment desk. Make an appointment with your doctor about 2 weeks after surgery. At the same time, you should make an appointment with physical therapy for the same day.

**ROTATOR CUFF REPAIR
Post Operative Rehabilitation****Weeks 0-6:**

- Sling worn at all times except during exercises and bathing
- Immediate post-operative CPM
- Elevation and external rotation
- Extend elbow QID → Pendulums OK
- Office evaluation at 2 weeks
- Discontinue CPM
- Therapist instructs patients in passive supine range of motion
 - Elevation and external rotation
 - Pendulums

Weeks 7-12:

- Office evaluation at 6 weeks.
- Discontinue sling
- Begin active assisted elevation and progress to active elevation as tolerated
- Begin active external rotation
- Continue passive range of motion stretching to regain full movement
- Avoid rapid movements, lifting >5 pounds.
- Avoid opening and closing car doors or office building doors.

3 Months:

- Office evaluation at 3 months
- Begin strengthening of grip, biceps, triceps, and scapular rotators with surgical tubing. Be cautious about strengthening patients in elevation. Avoid these exercises if there is any doubt about:
 1. Tendon quality
 2. Muscle quality
 3. Repair quality
 4. Patient comprehension

6 Months:

- Allow full activities as tolerated. Strengthen in elevation as needed

9 Months & 1 year:

- Office visit