



## PREOPERATIVE INSTRUCTIONS FOR SUBACROMIAL DECOMPRESSION SURGERY

The shoulder girdle is made up of several different joints including the Glenohumeral(ball and socket) and AC(where the collar bone meets the shoulder blade) joints pictured here. Some people have an abnormally hooked acromion as shown in the picture. Also, as stress is placed on the shoulder over a period of time, some people will experience degenerative/arthritis changes to the AC joint. These changes can lead to a bone spur that can impinge on the tissues below including the Rotator Cuff tendons, as the arm is elevated. If left untreated, this can become very painful and decrease shoulder function. Also, more serious problems can develop such as a Rotator Cuff tear.

A Subacromial decompression (SAD) involves the use of arthroscopic instruments to shave down or remove the excess bone on the undersurface of the AC joint. The surgeon may also remove a portion of the end of the collar bone if severe arthritis is present. The removal of this bone allows more room for the tissue below, including the Rotator cuff tendons, thus decreasing the chance of impingement.

### **Immediate Post-op Instructions**

- Ice to shoulder 20 minutes before and after exercising. As needed for pain/swelling, apply ice to shoulder 15-20 minutes out of every hour.
- Keep your incisions clean and dry until specified by your physician. The incisions must be covered while bathing or showering but may be cleaned with rubbing alcohol or peroxide until the incision is healed. Your sutures will be removed at approximately \_\_\_\_\_ days following surgery.
- Use a sling for your comfort for 5-7 days, especially when in a crowd or requiring protection of shoulder
- Hand and finger range of motion are important. Gripping or making a fist is encouraged during the day to promote circulation and prevent stiffness.
- Do not perform excessive shoulder motion beyond your tolerance
- Do not do any excessive or heavy lifting with the involved arm until allowed by physician
- Follow up with the Physician in \_\_\_ days from surgery
- **Do follow the instructions set forth in your protocol**

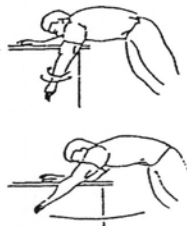
**Post-operative Exercise (perform 2-3 times a day)**

**Grip:**

Grip apparatus, putty, small rubber ball, etc. Use as continuously as possible all day long. (Not shown)

**Pendulum:**

Lean over table, supporting body with uninvolved arm. Let involved arm hang straight down in a relaxed position. Move your hips to cause the shoulder to move first side-to-side and then in circles, forward, and backward. Begin with small movements and gradually increase. Shoulder should move passively. Repeat \_\_\_ sets of \_\_\_ daily, \_\_\_ weekly.



**Rope and Pulley:**

The overhead rope and pulley should be positioned in doorway. Sit in chair with back against door, directly underneath pulley.

**A. Shoulder Flexion:**

With elbow straight and thumb facing upward, raise involved arm out to the front of body as high as possible. Assist as needed by pulling down with uninvolved arm. Hold overhead 5 seconds and repeat.



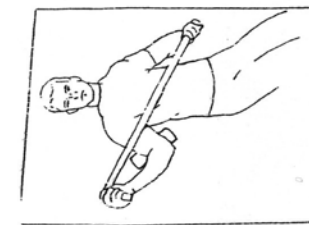
**T-Bar Exercises:**

**A. Shoulder Flexion:**

Lie on back and grip T-bar between index finger and thumb, elbows straight. Raise both arms overhead as far as possible keeping thumbs up. Hold for 5 seconds and repeat.



**B. Lie on back with involved arm 45° from body and elbow bent at 90°. Grip T-bar in hand of involved arm and keep elbow in flexed position. Using opposite arm, push involved arm into external rotation. Hold for 5 seconds, return to starting position and repeat.**



**Strengthening Exercises**

**Isometrics**



**1. Flexion**

Standing in doorway facing out the doorway, place involved arm in front of you, place hand on door frame and push as if to raise arm overhead. Hold submaximal force for 8 seconds and repeat.

**4. Internal Rotation**

Standing against a wall or in a doorway with arm at side and elbow bent at 90°, press front of hand into surface. Hold a submaximal force for 8 seconds and repeat.

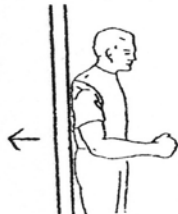


**2. Abduction**

Standing against a wall or in a doorway with involved arm at side, press back of forearm into surface. Keep arm at side with elbow bent. Hold a submaximal force for 8 seconds and repeat.

**5. Elbow Flexion**

Use uninvolved arm to hold involved elbow at angles of 45, 90 and 135°. Flex elbow into uninvolved hand keeping elbow still. Hold a submaximal force for 8 seconds and repeat. Perform \_\_\_ repetitions at each angle. Perform \_\_\_ sets of \_\_\_ repetitions: \_\_\_ daily, \_\_\_ weekly.



**3. Extension**

Standing in doorway, and in front of door frame, place involved arm behind you slightly, push backward into door frame. Hold submaximal force for 8 seconds and repeat.