

NEW ALBANY SURGICAL HOSPITAL



Patient Information Before Your Surgery

Shoulder Arthroscopy with Acromioplasty or Debridement

Physician: _____ Phone: _____

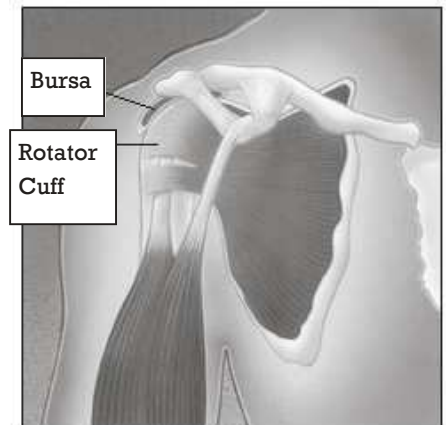
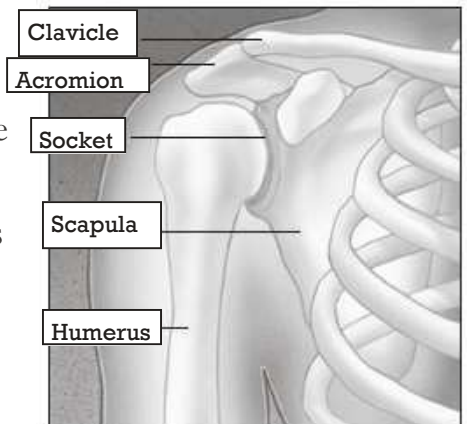
Basic Shoulder Anatomy:

The shoulder joint, a ball-and socket-joint, is made up of three bones: the clavicle (collarbone), the scapula (shoulder blade), and the humerus (upper arm bone). The top portion of the scapula (acromion) attaches to the collar bone (clavicle). The end of the scapula (glenoid), holds the ball-like head of the humerus in place.

The bones of the shoulder are kept in position by muscles, tendons and ligaments. Four muscles originate on the scapula and pass around the shoulder where their tendons fuse together to form the rotator cuff. A thin sheet of fibers surrounds the shoulder joint to provide stability. The inner lining of the joint (synovium) and cartilage allow for smooth motion between the joint surfaces. Motion between the rotator cuff and shoulder blade is cushioned by a sac-like membrane called the bursa.

About Shoulder Problems

The shoulder is vulnerable to a number of injuries as well as acute and chronic conditions. Conditions such as Bursitis or Tendonitis can occur with overuse or repetitive activities which cause rubbing or squeezing (impingement) of the rotator cuff. Osteoarthritis (OA) occurs when the articular cartilage supporting the joint wears thin causing changes in the bone and the development of bone spurs. Rheumatoid arthritis (RA) typically produces chronic inflammation, eventually damaging the inner lining of the joint. Both conditions (OA & RA) can cause destruction of the joint and surrounding tissues.



Illustrations courtesy of the American Academy of Orthopaedic Surgeons. Used with permission.

About Shoulder Problems (continued from the previous page)

Though *flexible*, the shoulder joint is very *unstable* because the ball of the upper arm is *larger* than the shoulder socket that supports it. Injuries are not uncommon and can include sprains, inflammation of the various joint structures, fractures, dislocations, or tears to the rotator cuff, tendons, ligaments or labrum.

Surgical Solutions

Arthroscopy

Shoulder arthroscopy allows an orthopedic surgeon to make a small incision to remove any damage within the shoulder joint and to view the inside of it by use of an instrument called an arthroscope. After the surgery, the patient is given a sling or a splint to support movement of the joint during recovery.

Arthroscopy with Acromioplasty or Debridement

The overall goal of the arthroscopic shoulder acromioplasty or debridement is to remove chronically inflamed and scarred bursa and shave bone or remove growths on the upper joint of the shoulder blade. The surgeon may also remove a small amount of bone from the underside of the acromion (the outer end of the shoulder blade where the collarbone is attached) and the acromioclavicular joint (the joint where the shoulder blade and collarbone meet). The goal of the procedure is to smooth any roughened areas while maintaining the normal anatomy as much as possible.

Before your surgery

- You will receive a patient information guide from your surgeon's office. Please be sure to read the guide and call us with any questions you might have. Pay particular attention to the section "Preparing for Your Hospital Visit" and "Preparing Your Home".
- Please bring your patient information guide (and any additional instructions you have been given) with you to the hospital. We will be reviewing and adding information to your guide to help you with your recovery process at home.
- Please be sure to bring an adult with you to drive you home and stay with you over the next 24 hours.

After your surgery

- Your symptoms may persist for a short period of time until healing is complete. Tenderness at the incision and numbness are not uncommon.
- After your surgery you will receive instructions on activity, pain control, comfort, diet and when to call your doctor. Please let us know if you have any questions or concerns.