

## **Rotator Cuff Repair: Procedure & Surgical Risks**

- Outpatient Surgery
  - Hospital or Surgery Center will contact you the day before about your time of arrival and specific instructions.
  - After arrival, you will be evaluated by the anesthesia team and discuss different types of anesthesia and risks.
  - Surgical procedure takes 60-90 minutes.
  
  - Your shoulder will be prepped with a sterile solution. Several small incisions will be made along your shoulder. A sterile solution will be used to fill up your shoulder joint and an arthroscope (camera) will be inserted into your shoulder to visualize your rotator cuff tear and biceps tendon and diagnosis your problem. A variety of small surgical instruments (e.g., blunt hook, motorized shavers and burr, scissors) are inserted into the second small incision to:
    - Remove/pull on tissues (subacromial decompression)
    - Remove loose fragments of bone or cartilage
    - Remove bone spurs
    - Remove inflamed synovial tissue (bursa)/scar tissue
  
  - Through the incisions your rotator cuff will be repaired/biceps tendon (if necessary) by using anchors to re-attach the tendons to the bone. At the end of surgery, the fluid is drained from your shoulder and steri strips/sterile dressing is applied to your incisions. You will be placed in a sling with small pillow for **5 weeks**. You will be moved to the recovery area. Instructions will be provided for wound care and restrictions.
  
  - Prescriptions will be provided
  
  - **Anesthesia Risks:** all risks of anesthesia will be discussed with you when meeting the anesthesia team on the date of your scheduled surgery.
  
  - **Common Risks for Surgical Procedures:** Risks of any surgical procedure are low but do occur and may include the following: (1) Blood loss (2) Infection (3) Blood clot (4) Nerve injury (5) Blood vessel injury
  
  - **Specific Risks to Rotator Cuff Repairs:** (1) Postoperative bleeding within the shoulder joint (2) Persistent swelling (3) Persistent pain (4) Stiffness (5) Persistent muscle weakness (6) Failure to heal rotator cuff repair and relieve symptoms (7) Fracture of acromion or distal clavicle (8) Numbness/tingling in arm (9) Re-tear of the rotator cuff
- \*\*These are the most common risks of surgery however this does not include all risks of surgery that may occur.

This sheet was provided to assist in your understanding of your surgical procedure and potential risks. It is meant to supplement the information that was discussed with you in the office. The incidence of surgical complications are low, however risks of surgery do exist. This additional information attempts to educate you on these risks, benefits, and common complications that could possible occur. If you have any further questions, please feel free to contact the office. We feel it is important to educate our patients about their surgical procedures and options available to them. This sheet describes the most common aspects of a Rotator Cuff Repair. Each patient's case and surgery is individual and may result in a scenario that is different than what is described above.

## **Open Neer Acromioplasty & Rotator Cuff Repair: Procedure & Surgical Risks**

- Outpatient Surgery
- Hospital or Surgery Center will contact you the day before about your time of arrival and specific instructions.
- After arrival, you will be evaluated by the anesthesia team and discuss different types of anesthesia and risks.
- Surgical procedure takes 60-90 minutes.
  
- Your shoulder will be prepped with a sterile solution. An open incision approximately 3-4 inches will be made along your shoulder. Through this incision a decompression (removal of any bony spurs) and rotator cuff repair will be performed using anchors to re-attach the tendons to the bone. Steri-strips/sterile dressing will be applied to your incision. You will be placed in a sling with small pillow (sometimes a large pillow if the tear is very large) for **5-6 weeks** to prevent tension/pulling on your rotator cuff repair. You will be moved to the recovery area. Instructions will be provided for wound care and restrictions.
  
- **Anesthesia Risks:** all risks of anesthesia will be discussed with you when meeting the anesthesia team on the date of your scheduled surgery.
  
- **Common risks for surgical procedures:** Risks of any surgical procedure are low but do occur and may include the following: (1) Blood loss (2) Infection (3) Blood clot (4) Nerve injury (5) Blood vessel injury
  
- **Specific Risks to Rotator Cuff Repairs:** (1) Postoperative bleeding within the shoulder joint (2) Persistent swelling (3) Persistent pain (4) Stiffness (5) Persistent muscle weakness (6) Failure to heal rotator cuff repair and relieve symptoms (7) Fracture of acromion or distal clavicle (8) Numbness/tingling in arm (9) Re-tear of the rotator cuff (10) Stiffness/loss of motion

\*\*These are the most common risks of surgery however this does not include all risks of surgery that may occur.

This sheet was provided to assist in your understanding of your surgical procedure and potential risks. It is meant to supplement the information that was discussed with you in the office. The incidence of surgical complications are low, however risks of surgery do exist. This additional information attempts to educate you on these risks, benefits, and common complications that could possible occur. If you have any further questions, please feel free to contact the office. We feel it is important to educate our patients about their surgical procedures and options available to them. This sheet describes the most common aspects of an Open Neer Acromioplasty with Rotator Cuff Repair. Each patient's case and surgery is individual and may result in a different scenario than what is described above.