

Southeastern Orthopedic Surgery Center

Patient Guide to Shoulder Surgeries and Injuries

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Shoulder Anatomy

Insert Picture Here

Acromion- the top part of the shoulder
Clavicle- (collarbone) is the bony link that holds the shoulder to the body
Glenoid- is a shallow socket
Labrum- is a rim of cartilage to which the capsule attaches and helps stabilize the joint
Bursa- is a small lubricating sac that cushions the tendon from the bone
Capsule- is a pocket that provides stability
Humeral Head- is the rounded top (ball) of the arm bone
Rotator Cuff Muscles and Tendons- holds the shoulder in place

Common Diagnosis and Treatment

Arthroscopy Procedure

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An arthroscopy is usually an outpatient procedure that will be done at either the Southeastern Orthopedic Surgery Center, Memorial Hospital, St. Joseph's/Candler Hospital; depending on your insurance.

Arthroscopy Surgery

An arthroscopic surgery is when the Doctor inserts a fiberoptic scope and small instruments through small puncture wounds. This allows the procedure to be "minimally invasive". The camera scope is connected to a monitor that allows the Doctor to see inside the joint and perform surgery.

Arthritis- Arthritis is termed "joint inflammation". It is a break down or "wear and tear" of the joint caused by loose bodies of cartilage or fragments of bone.

Treatment of this diagnosis is to "Clean Up" the joint. Your Doctor will look inside the joint and smooth out rough surfaces and remove loose bodies. Also, shaving or scraping the bone may help to promote new cartilage growth.

Instability- Instability occurs when a shoulder joint is forced beyond its normal range of motion. The ball of the shoulder can pop out of socket and the labrum and capsule can pull away from the socket.

Treatment of this diagnosis is to "stabilize the joint". The capsule and labrum will be reattached to the front of the glenoid by your Doctor. This is most often done by an arthroscopy, however sometimes a mini incision is needed to attach the tissue more securely.

Labrum Tear- An unstable or dislocated joint may lead to a labrum tear. You may feel your shoulder "popping" or "catching". The arthroscopic procedure may reveal a flap of loose or torn labrum.

Treatment of this diagnosis is to remove or repair the torn labrum. Sometimes an open surgery may be needed to reattach tissue and help stabilize the shoulder joint.

Impingement- Impingement occurs when the rotator cuff becomes inflamed and thickened, and gets trapped under the acromion. This causes a squeezing of the rotator cuff, which is known as impingement.

Treatment of this diagnosis is to remove what is causing the impingement. This may include smoothing or trimming the acromion bone, shaving/removing inflamed bursa or torn rotator cuff.

Rotator Cuff Tear- If the rotator cuff muscle is torn, surgery will be performed to repair the tear. Most of the time this procedure can be done through an arthroscopy, however with an extensive tear, your surgeon may have to make an "open" incision to fix the rotator cuff.

FAQ'S about Surgery:

What can I expect before surgery? After the decision has been made to have surgery, a history and physical will be obtained.

Your medical history will determine any pre-operative lab work to be done. If you have a history of heart problems you will most likely have to have an EKG and chest x-ray. The nurse will let you know everything that needs to be done. The nurse will also go over pre-operative instructions and make sure that you have an understanding and questions are answered.

Click here to download pre-op instructions.

What can I expect the day of surgery? Arrive at the designated center/hospital on time for surgery. You will check in at the front desk. Make sure to bring loose clothing, depending on the body part operated on. For example, for a shoulder surgery a loose button down shirt would be the ideal choice. For a knee surgery, loose pants, shorts. You will be asked to change into a hospital gown and all belongings will be placed in a bag. Please leave all valuables at home and remove all jewelry before surgery. An IV will be started in the pre-op/holding area. Your operative site will be marked. A nurse will take you back to the operating room when it is time for surgery.

What can I expect in the recovery room? After your surgery is over, you will be taken into the recovery room. Recovery room stay varies, but you can plan on being there for at least one hour. Your family/friends may wait in the lounge until a nurse calls them back to see you. Your Doctor will speak to you and your family before you leave to answer any questions about the surgery. You will be given discharge instructions for post-op care and will also be given a prescription for pain medication.

What about a follow-up appointment or physical therapy? A follow-up appointment is usually made for you 7-10 days after surgery. If you require therapy, a blue therapy prescription sheet will be given to you. The number to the therapy services closest to you will be circled at the top. Call the number to make the appointment and bring the script with you to your appointment.

What if I have any questions about anything? You can call the orthopedic clinical assistants 912.644.5331.

Please return for all post-op visits and all therapy visits as instructed.

If any problems develop, please call Dr. George's assistant, Tina 912.644.5331. If it is after hours, please call our main number 912.644.5300 and the after hours service will notify the on-call physician.