

Orthopaedic Department
York teaching hospital

This is a follow-up letter to your recent telephone consultation with the Fracture Care Team explaining the ongoing management of your injury. Your case has been reviewed by an Orthopaedic Consultant (Bone Specialist) and Fracture Care Physiotherapist.

You have sustained a dislocation to your shoulder with an associated fracture.

About Your injury: The shoulder is a ball and socket joint. During your dislocation part of this joint was fractured. The shoulder joint does not respond well to being injured and longstanding stiffness is often inevitable. Following this type of injury you may never be able to fully lift the arm straight up in the air again. The main aim is to regain enough movement to perform day to day activities.

Healing: It normally takes between 6-12 weeks for this injury to heal.

Pain and numbness: Take pain killers as prescribed.
You may find it more comfortable to sleep propped up with pillows.
You may get a small patch of numbness on the outside of the shoulder. This is normal and should resolve over time.

Using your arm: Wear the sling for 6 weeks to support your shoulder. It is important to keep the shoulder moving to prevent stiffness but not to aggravate your injury.

Follow up: You will be seen in Upper Limb Clinic 1-2 weeks after your injury. You may have another x-ray of your shoulder and the Specialist will assess your injury. They may refer you to physiotherapy.
If you have not received this appointment within one week of receipt of this letter please contact the booking hub directly on Tel: .

Area of injury:



If you are worried that you are unable to follow this rehabilitation plan, or have any questions, then please phone the Fracture Care Team for advice.

Or, if you are experiencing pain or symptoms, other than at the site of the original injury or surrounding area, please get in touch using the telephone or e-mail details at the bottom of this letter.

Please follow the management plan below

What to expect:

Weeks since injury	Rehabilitation plan
0-3	<ul style="list-style-type: none"> ✓ Wear the sling all the time - even in bed at night. ✓ Remove the sling for exercises and personal hygiene. ✓ Start the initial exercises straight away. It might take a few days practice to feel comfortable with them.
3-6	<ul style="list-style-type: none"> ✓ Continue to wear the sling ✓ Progress to the Stage 2 exercises. ✗ Do not lift your elbow above shoulder height as this may be painful.
6 -12	<ul style="list-style-type: none"> ✓ The fracture will be largely healed. ✓ Try not to use the sling. ✓ Begin normal light activities with the arm and shoulder. ✓ Increase movement using the Stage 3 exercises. ✓ You should be able to increase day to day activities. ✗ Heavy tasks may cause some discomfort. ✓ Start to lift your arm overhead if possible.

Advice for a new injury:

Cold packs: A cold pack (ice pack or frozen peas wrapped in a damp towel) can provide short-term pain relief. Apply this to the sore area for up to 15 minutes, every few hours. The ice must never be in direct contact with the skin.

Rest: Try to rest your shoulder for the first 24-72 hours. However, it is important to maintain movement. Gently move your shoulder following the exercises shown. These should not cause too much pain. This will ensure your shoulder does not become stiff and it will help the healing process.

Smoking advice:

Medical evidence suggests that smoking prolongs fracture healing time. In extreme cases it can stop healing altogether. It is important that you consider this information with relation to your recent injury. Stopping smoking during the healing phase of your fracture will help ensure optimal recovery from this injury.

For advice on smoking cessation and local support available, please refer to the following website: <http://smokefree.nhs.uk> or discuss this with your GP.

York Virtual Fracture Clinic Contact details:

Phone: 01904 726575

Scarborough Trauma Assessment and Treatment Unit (TATU):

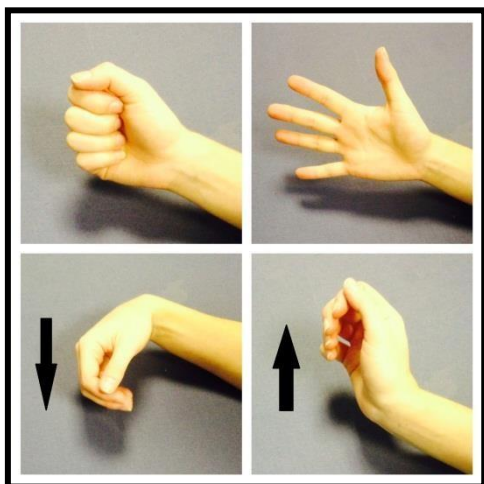
Phone: 01723 342021 / 07385 463781

Email: virtualfractclinic@york.nhs.uk

Exercises

If you have stiffness in your elbow or hand from wearing the sling, you may wish to perform these exercises first. However, once they become easy you can start with the posture and pendulum exercises.

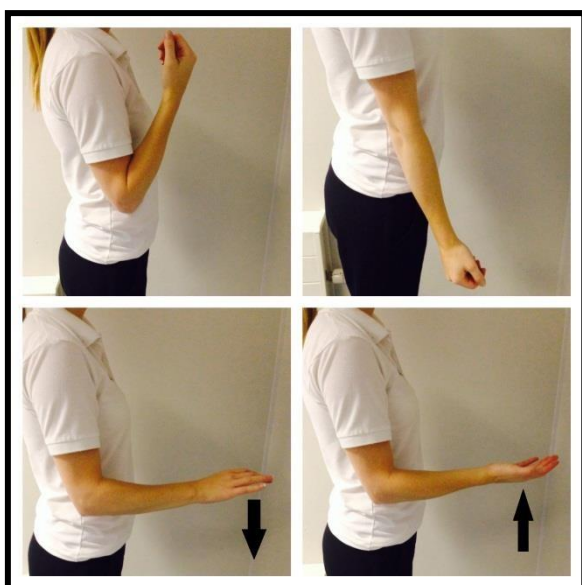
Initial Exercises to do 4-5 times a day:



Finger and wrist flexion and extension

Open and close your hand as shown 10-15 times. Then move your wrist up and down 10-15 times.

After a few days, hold a soft ball/ball of socks. Squeeze the ball as hard as possible without pain. Hold for 5 seconds and repeat 10 times.



Elbow Bend to Straighten

Bend and straighten your elbow so you feel a mild to moderate stretch. You can use your other arm to assist if necessary. Do not push into pain.

Forearm Rotations

Put your elbow at your side. Bend it to 90 degrees. Slowly rotate your palm up and down until you feel a mild to moderate stretch. You can use your other arm to assist if necessary. Do not push into pain.

Repeat 10-15 times provided there is no increase in symptoms.

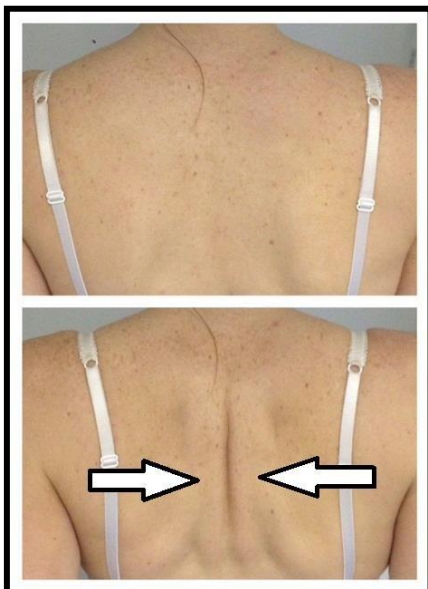
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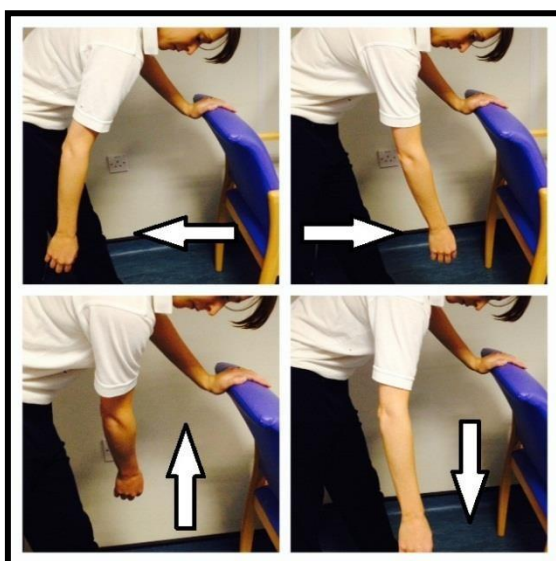
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Postural awareness

Bring your shoulders back and squeeze your shoulder blades together as shown in the picture. Do this with or without your sling on.

Hold the position for 20-30 seconds and repeat 5 times provided there is no increase in symptoms.



Shoulder pendulum exercises

Stand and lean forward supporting yourself with your other hand. Try to relax your injured arm and let it hang down.

1. Swing your arm slowly and gently forwards and backwards.
2. Swing your arm slowly and gently side to side.
3. Swing your arm slowly and gently in circles clockwise.

Continue for approximately 1-2 minutes in total provided there is no increase in symptoms.

Remember to try and relax your arm.

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Stage 2 Exercises

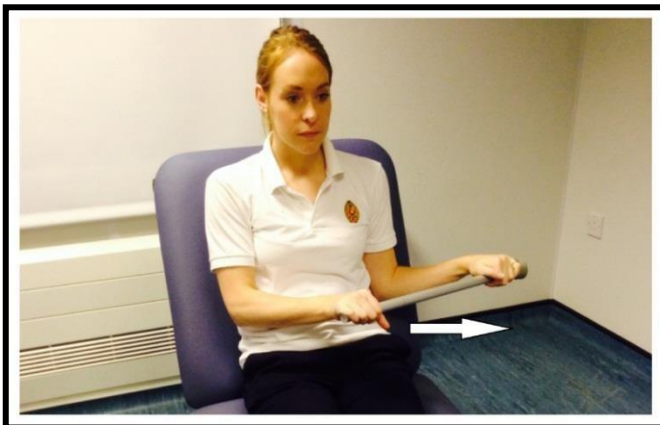
To start at 3 weeks post injury and to do 4-5 times a day:



Active assisted Shoulder flexion

Use your other hand to lift your arm up in front of you as shown in the pictures.

Repeat 10 times provided there is no increase in symptoms.



Active assisted External rotation

Keep the elbow of your injured arm tucked into your side and your elbow bent. Hold onto a stick/umbrella/golf club or similar. Use your unaffected arm to push your injured hand outwards. Remember to keep your elbow tucked in. Push until you feel a stretch.

If you don't have a stick you could simply hold the injured arm at the wrist and guide it outwards.

Hold for 5 seconds then return to the starting position. Repeat 10 times provided there is no increase in symptoms.

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Stage 3 Exercises

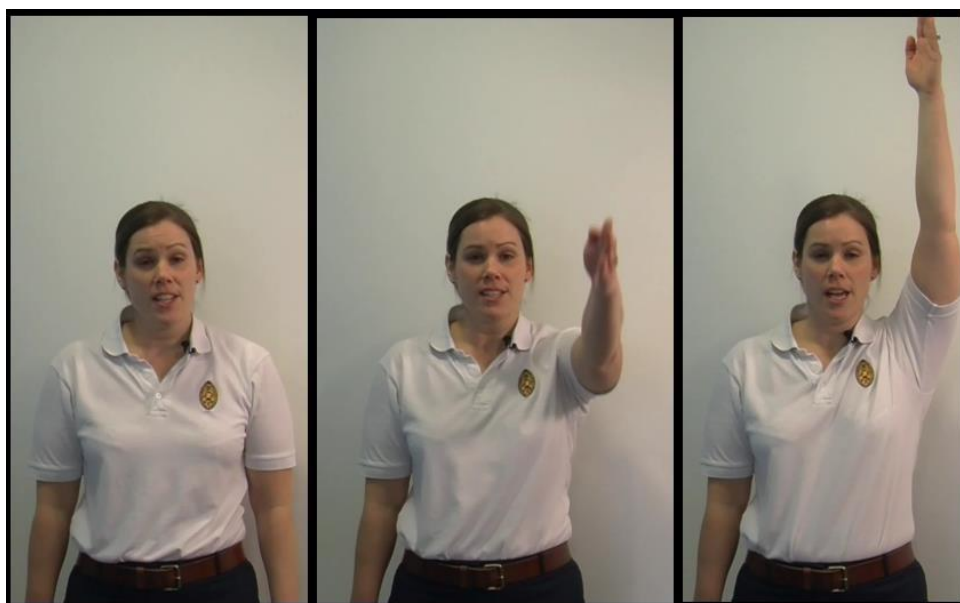
To start at 6 weeks post injury and to do 4-5 times a day:

When you have regained full range of movement during the above exercises without pain you can start to do the exercises without the support of your other hand; this is known as active range of movement. Then when you have regained your full range of movement without the support of the other arm you can start to build up your regular activities.

Perform these exercises 10 times each. Only go as far as you can naturally, without doing any trick movements to try and get any further. The movement should increase over time and should not be forced.

Active Forward flexion:

With your thumb facing up, try to move your arm up, keeping it close beside your body.



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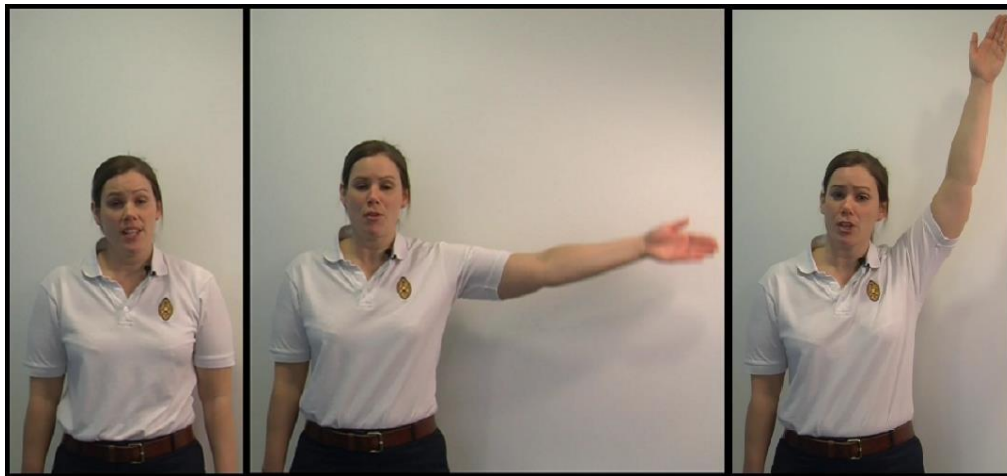
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Active Abduction

With your thumb facing up and outwards, try to move your arm in a big arc out to the side.

**Active External rotation**

With your elbow by your side, rotate your forearm outwards, keeping your elbow at about 90 degrees in flexion.

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