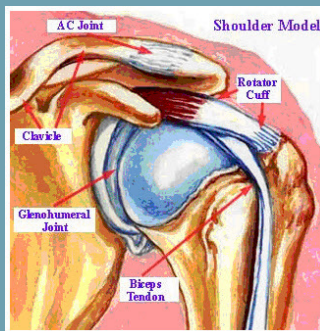


A Patient Guide - Post Rotator Cuff Repair



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For Dr Simon Tan, January, 2010

An Occupational Therapy Guide

Performing activities of daily living (ADL's) after rotator cuff repair surgery.

After your rotator cuff repair surgery you will be one handed for a period of time and will need to think about how you will do certain tasks when you return home from the hospital. The following guide gives some tips on how to manage at home. Any equipment suggested in this handout can be purchased through the companies listed at the end of this booklet.

This booklet is a guideline only. If you have any questions please speak to Dr Tan or your Occupational Therapist.



Living with a sling

You need to be in a sling for **4 to 6 weeks** following your shoulder operation. You will have to follow the following precautions to protect your shoulder.

Throughout the whole time the arm must not be allowed to go lower than the position it is in when in the sling. Your helper should take full control of the arm – you need to keep the arm as relaxed as possible and allow the helper to 'do the work'. Your sling must stay on at all times, day and night except when you are performing your exercises or in the shower.

It is essential that you regularly loosen or release the sling to exercise and move your elbow, wrist and hand to prevent stiffness of these joints. This should be done at least 4 times per day. Please see your physiotherapy protocol and guidelines for exercise advice and instructions.

General hints

You will wear your sling over your clothes for approximately 4 to 6 weeks after your surgery. Always dress your operated arm first and undress it last. If you are in a sling you will probably need help with washing and dressing yourself for the first few weeks. (See dressing procedure at the end of the booklet.) Your occupational therapist will go through this with you when you are in hospital. For safety it is best to avoid stepping into and standing in a bath whilst your arm is in the sling unless you are certain of your own balance. If you do, a non-slip mat would be advisable. Your therapist can advise you about bathing.

Washing and Dressing

You will require loose clothing that preferably buttons down the front or tank tops with large sleeves. Avoid clothing with small buttons, hooks and zips. Ladies may find a bra uncomfortable and may prefer to wear a strapless or front fastening bra. Track pants or pants with elastic waists are advised for the first few weeks. Consider slip-on, easy fitting shoes.

Dressing/Washing

Before starting, ensure you sit on the bed or on a chair and place a pillow under the abduction sling. If sponge bathing, have a bowl of water and toiletries near by before undressing.

When you are well enough to shower, gather your clothes and place them nearby. You may feel a little weak or de-conditioned during the first few weeks after your surgery. Be mindful of not standing for long periods to avoid falls. Your therapist can advise you on the use of a shower stool or chair to sit on when in the shower. The equipment companies listed at the back of this handout lists equipment hire companies who will deliver a bath chair/stool to you for a small fee. Most major pharmacies also have these items for loan.

If your shower is over the bath, it is advisable not to climb into the bath or stand to bath during the first few weeks. Your therapist will usually recommend the loan of a bath board which fits over the bath. This will allow you to sit while showering and decrease the risk of a fall.



Undressing – This can be one of your hardest tasks after your operation.

1. Undo the waist strap from the front of the abduction sling.
2. Undo neck strap from the sling or lift the sling over your head with your un-operated arm. Take the affected arm out of the sling. Once the sling is removed, the top garment eg. shirt is removed by taking your arm out of the sleeve off the unaffected arm first.
3. You can now use your un-operated arm to assist with removing the sleeve from your operated arm.
4. To take your pants/skirt off, use your unaffected arm to pull the garment down to your hips. You can now sit down to pull the garment all the way down to your feet. Now step out of your pants/skirt. Be sure to keep your operated arm bent and tucked into the waist.

Dressing with help

To dress the top
threading the
shoulder as



half, the helper should dress the operated arm first, gently
sleeve onto the arm and taking the garment as far up to the
possible.

1. Keep your operated arm tucked into your waist.
2. You may now be able to put your unaffected arm into the 2nd sleeve of the garment.
3. You can now put your sling back on. Sit on the edge of the bed and place the sling on a pillow.
Slide your arm into the support part of the sling and fasten the Velcro tabs.
4. Now put the shoulder strap around your neck
5. Finally refasten the waist strap back onto the front of the sling.

Getting dressed without help - front opening clothes.

Always dress your operated arm first.

1. Sit on the edge of a chair or stand with your arm tucked into waist. Slide your **operated** arm into the garment first using your good arm to assist. Do not assist with your operated arm, keep it tucked elbow.
2. Once this arm is fully in the sleeve bring the garment around your back and put the other arm in. **Do not reach behind with your operated arm.**
3. Any fasteners must be fastened only with your un-operated arm. Once you have dressed your upper body, place your arm back in the sling.



your
good arm
into your

Dressing with a sleeveless shirt or singlet.

1. Sit on the bed or a chair. Gather the singlet bottom and top with your good arm and place your operated arm into the loose sleeve first.
2. Now put the neck opening over your head.
3. When you have one arm and head in the garment, put your good arm through the other hole.
4. Pull the garment down to your waist with your **good** arm.

Wearing a bra

Women will find it easier to do up the back of the bra before putting it on. It is easier to sit on the edge of the bed, step into the bra and pull it up over your hips, then waist until you are able to put your arms into the straps.

Footwear

Wear thongs, slip-ons or shoes with Velcro. If you're flexible, you may find that you have no problem bringing your foot close enough to easily reach and tie with both hands. But just after your surgery, when

you're still sore, it'll be easier to just slip your foot into a shoe that doesn't need to be tied. Make sure your shoes are non slippery to avoid falls.

By 6 weeks after your operation you should be able to have returned to dressing 'normally', using both hands.

Domestic Tasks

Use ready prepared meals or items that need little preparation e.g. pre-chopped vegetables. There is equipment available which can help with food preparation, for example easy grip jar openers, pizza cutters. Some of this is available in large supermarkets or from the suppliers which are listed at the back of this booklet. Your therapist will advise you if required.

You may manage light domestic tasks one handed but you should avoid heavy household duties.

No pushing or pulling with your operated arm.

Kitchen activities

Meal times

For the first **4 weeks** after your operation, you will feed yourself with your **un-operated** hand only. After this time you may return to feeding yourself 'normally' using both hands. A splade is helpful with cutting food and keeping food on your fork.

This includes making meals, snacks and drinks for yourself. For the first **6 weeks** you must use your un-operated arm for kitchen activities. After this time you may return to using both arms. There are a number of excellent tools available from the bigger supermarkets to assist with preparing meals. These include one handed jar openers and non slip grip mats to put your plates on.

You may only lift light items, such as a cup of tea/coffee for the first six weeks.

AVOID LIFTING ANYTHING HEAVY FOR 3 MONTHS.

Housework

Light housework may resume after **6 weeks**. More strenuous housework should be avoided until 3 months after your operation.



After approximately six weeks you will be given permission to resume light activities of daily living.

You need to start being more aware of how to use your shoulder. Adopt good practice as suggested below:

Standing/sitting

Always maintain a good posture and avoid hunched or drooped shoulders. When getting up from a chair do not lean on your operated arm until your therapist advises you to do so. Adjust the height of work surfaces to elbow height if possible.

Lifting/carrying

Since your muscles will not have been used for a while, they will not be as strong as they were before the operation. It is advisable not to lift heavy objects until you are guided by your therapist or Dr Tan.. For the first four weeks the most you can lift is the equivalent of a cup of tea/coffee. Most patients at six weeks will be allowed to lift light objects below shoulder level. The same applies with pushing/pulling objects.

Reaching

Even after you come out of your sling at six weeks, reaching activities may be difficult and painful to do. Therefore it is advisable not to attempt to use your arm above shoulder level. Gradually, as your strength improves this will be allowed. Again, be guided by your physiotherapist.

Returning to work

You should discuss when you can return to work with your doctor. Jobs involving heavy laboring/lifting should be avoided until your shoulder is sufficiently strong enough to manage these activities. A light job such as administrative/paper work may be resumed as soon as you feel able after the operation, usually 2-3 weeks. Again Dr Tan will advise you on your return to work.

Driving

You should not attempt to drive until you are out of your sling, your pain has subsided and you feel confident in your own ability. This is usually at six weeks. Dr Tan or your physiotherapist can advise you on this. If you attempt to drive before this time and have an accident, you may not be covered by insurance. (Ref. Assessing Fitness to Drive. 2nd Edition. Austroads)

Sleeping

Initially avoid lying on your operated arm. Lying on your back may be the most comfortable position with lots of pillows under your shoulders to lift you into a semi sitting position (fig 3). A pillow placed behind the operated arm may be advised to prevent the arm from falling backwards. Your therapist will advise you. You may also try lying on your un-operated side and placing your operated arm on the outside of your leg (fig 2). Again place a pillow in front of this arm to prevent the arm and shoulder from falling forward.



Fig 1



Fig 2



Fig 3

Transferring

This means getting in and out of your chair, bed and bath and getting on and off your toilet. For the first 6 weeks you must only push up from the bed, chair, toilet and bath using your un-operated arm. **After 6 weeks** you may return to using both arms as pain allows.

Stairs

When climbing/descending the stairs, hold the banister with your un-operated arm. This may mean that a second banister is required. After 6 weeks you may hold the banister with either arm.

Putting on your sling



Fig 1 (with assistance)

1. If someone is fitting the sling for you, support your operated arm with your elbow at right angles using your un-operated hand. Slide the sling in from behind so that your elbow fits snugly into it.

1. If fitting the sling without assistance, ensure that you are seated, with your elbow bent to 90 degrees (a right angle - see picture below). You will find it more comfortable if your arm is supported on a pillow.

(without assistance)



Fig 2

1. Fasten the strap across your forearm, it should be between your elbow crease and wrist.



Fig 3

4. Take the shoulder strap up to the opposite shoulder and attach the velcro to the strap.



Fig 4

1. Take the body belt around your back and attach it over the front of the elbow section of the sling. Adjust as necessary so that your arm is held snugly against your body. Attach the strap back onto itself so that your elbow is held at right angles (90 degrees flexion - see picture below)



Fig 5

4 to 6 Weeks After Your Surgery

- You are allowed to move your shoulder as long as it is assisted or supported. This allows you to start using your repaired arm for more activities of daily living. It is important to do so even if the arm feels weak and uncoordinated.
- Dressing will remain basically the same, but you are now able to raise your repaired arm up while providing some support under your elbow to slide sleeves down your arm. You should also be able to put your hands in your pockets
- Grooming - you should now be able to hold onto things like your toothbrush, hair dryer, deodorant, etc., with the hand of your repaired arm. Be sure to support your elbow with your other hand. You should be able to brush your hair on the opposite side of your head and wash and shave the opposite side of your face. To wash and/or shave the underarm on the repaired side, walk your fingers up the wall and hold your arm up by holding on to the wall. This will allow you to clean thoroughly under that arm.
- Basic household activities - It is important at this stage to begin sliding your arm across the counter to reach for light items such as silverware, etc., and to support your arm while reaching for light plastic cups on shelves.

Remember the key is to start using the arm as much as possible in an assisted manner.

6 to 12 Weeks After Surgery

- You are now able to use your arm actively or raise it on its own without the support of your unaffected arm. You should now be able to reach for sleeves and to reach to tuck your shirt into your pants. If you commonly wear your bra in the back you should be working on that as well.
- You should be able to shampoo your hair with both arms, style your hair by holding both a hair dryer and a brush, and reach for items at shoulder level and higher.
- Now is the time to start thinking about returning to a normal routine. If you are anticipating returning to work, active participation in a sport or hobby, or participation in household chores, think of areas that may be difficult for you and talk about them with your therapist. Your therapist will have ideas on strengthening, temporary modification, and suggestions on how to avoid further or repeated injury. During your newly resumed activities it is important to be aware of your posture. Do not

elevate and shrug you shoulders up or hold them stiff. This will cause increased muscle tightness and fatigue.

- Remember to use your arm and incorporate it into your everyday routine. This will allow you to keep your range of motion and strength. It will also help developing habits of moving your shoulder and arm in the wrong way. Avoid the incorrect habitual movement patterns.

Equipment Suppliers:

Life Health Care
Phone 9618 5000

Independent Living Specialists
Phone 1800 008 267

Able Rehabilitation
Phone 9714 1100

NB - ALL THE ABOVE ARE GUIDELINES ONLY. IF YOU HAVE ANY CONCERNS OR ADDITIONAL QUERIES PLEASE CONTACT DR. TAN OR YOUR OCCUPATIONAL THERAPIST.

References:

American Journal of Orthopedic Medicine

Occupational Therapy: Practice Skills for Physical Dysfunction

Occupational Therapy for Physical Dysfunction Managing Physical/Occupational/Speech Therapy and Rehabilitation Care, 7th Edition 2009.

Assessing Fitness to Drive. Road and Traffic Authority