

Injuries of the Shoulder

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The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available
- If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice from 111
- Keep the environment clean and tidy
- Let's work together to keep infections out of our hospitals and care homes.

Introduction

The doctor has diagnosed you as having a fracture or a soft tissue injury of the shoulder. This information leaflet has been written to help you manage this injury at home. An appointment may also be arranged for you to see a physiotherapist.

Have you been told you have a fracture?

A fracture (or a break) is damage to a bone. This may be a small chip of bone or a complete break through the bone.

How are fractures treated?

Fractures may be treated in a number of ways:

- Plaster cast
- Internal fixation is when the fracture is fixed with nails, plates, screws, or wires
- External fixation is when nails are placed into the bone with a metal plate outside to hold the bone still while the fracture heals
- Reduction in theatre: the bone is put into a good position. This is often followed by one of the above treatments.

Some fractures are not treated in any of the ways outlined above. They may be managed with a sling, splint, brace or tubular bandage and you may be encouraged to begin exercising as soon as possible.

Have you been told you have a soft tissue injury?

This includes sprains, strains, and bruises which affect the soft tissues of the body. Most commonly injured are the ligaments, muscles, tendons, and joint capsules. Following a fracture the soft tissues will also have been injured.

There is no set time for a fracture or a soft tissue injury to heal. The doctors, nurses, and physiotherapists will give you advice on what you can expect and what you should be doing. You should expect some swelling and discomfort for several weeks.

How can I manage my injury at home?

The regime of protection, rest, ice, and elevation is a simple and effective method of early treatment, particularly when swelling is present.

- **Protection** – this may include a brace or splint, tubular bandage or a sling
- **Relative rest** – rest the affected area for the first few days, avoiding excessive activity, using any of the above supports you have been given.

Use the following methods of treatment only if you have swelling in the hand and/or forearm:

- **Ice** – this is effective in reducing pain, inflammation, and swelling. **Do not use if the area is numb, you have weeping or bleeding wounds, you are diabetic, or you have problems with your circulation.** There are two methods for using ice:
 1. Place ice in a bucket of water and place the affected hand in the bucket for 15-20 minutes
 2. Wrap crushed ice or frozen peas in a damp tea towel to make an ice pack. Cover the affected area with oil to protect the skin and place the ice pack over the area for 15-20 minutes (10 minutes if this is a bony area).

If you have a burning sensation or notice any blistering, remove the ice immediately.

- **Elevation** – this helps to reduce swelling and inflammation. Elevate the swollen hand as much as possible in the first few days, this should be done for at least 20 minutes every two hours.

For the first three days DO NOT apply heat, massage the injury, or drink alcohol as these activities may increase bleeding or swelling.

Should I take pain relief?

Your doctor or pharmacist can advise on appropriate pain relief which, if taken regularly, can improve comfort and reduce muscle spasms. If your pain is well controlled you will manage exercises more easily which will aid recovery.

Should I wear a sling?

You may have been provided with a sling to support the arm. You will be advised how long to wear this for. Whilst the arm is in the sling no weight should be placed in the hand. The sling may be removed for washing, dressing, and exercise only. You may also be required to wear the sling at night, and you will be unable to drive.

How should I dress myself?

Try to wear clothes that open all the way down the front such as shirts and cardigans. Put the injured arm into the sleeve first when dressing and avoid tugging on the arm. When undressing, take the injured arm out of the garment last.

What is the best position to rest and sleep in?

If you are sitting it may be helpful to place a pillow under the arm for added support. Use of pillows, particularly a v-shaped pillow can limit movement at night and help sleep. It may take several weeks for it to become comfortable to lie on your injured shoulder. Lying on your back or other shoulder is therefore recommended.

Can I drive?

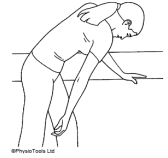
Your doctor or physiotherapist will advise you when it is safe to return to driving. You must be in full control of the vehicle before attempting to drive again. You should not drive whilst wearing a cast, brace, or sling.

Why exercise?

Early exercise can have a positive influence on tissue healing and reduce the potential for joint and soft tissue stiffness. Too much movement or the wrong type of exercise however may be harmful to tissue healing and it may cause inflammation which can increase your pain. If you are not sure if it is safe to do something, please talk to your physiotherapist first.

Exercises – to be completed 3-5 times a day

Stand leaning on a table with the unaffected hand. Let your affected arm hang relaxed straight down. Swing your arm forwards and backwards and in circular motions. Repeat 5-10 times.



Sit or stand. Place your hands on a table. Gently slide your hands forwards and back along the table as far as is comfortable. Repeat 5-10 times. You can also move the hand in circular motions.



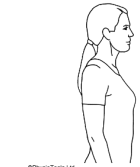
Stand with your hands rested on a surface (do not lean through your hands). Keeping your shoulders and arms relaxed gently step backwards as far as is comfortable. Repeat 5-10 times.



Stand or sit. Hold your upper arm close to your body with your elbow at a right angle. Using your unaffected hand turn the forearm of the affected arm outwards as far as is comfortable and then bring it back into the body. Repeat 5-10 times.



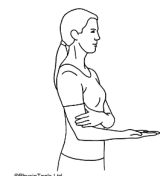
Stand or sit. Move your shoulder blades gently together and hold for 5 seconds. Repeat 5-10 times.



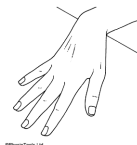
Stand. Grasp the wrist of the arm you want to exercise. Bend your elbow and assist the movement with your other hand. Straighten your elbow. Repeat 5-10 times.



Stand with your elbow bent and palm turned down. Turn your palm up and down rotating your forearm. Repeat 5-10 times.



Support your forearm on a table as shown. Make a fist. Then straighten your fingers and bend your wrist down. Repeat 5-10 times.



Other exercises to progress to

Stand facing a wall. 'Walk' your fingers or slide your hand up the wall as high as possible. Reverse down in the same way. Repeat 5-10 times.



Lying on your back, elbow bent. Straighten your arm towards the ceiling. Repeat 5-10 times. As this gets easier you can introduce a light weight.



Sit or stand. Keep upper arms close to the sides and elbows at right angles. Turn forearms outwards. Repeat 5-10 times.



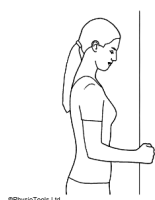
Stand with arms behind your back and hold one hand. Slide your hand up along your back. Repeat 5-10 times.



Lying on your back with hands behind your neck and elbows pointing towards the ceiling. Move elbows apart and down to touch the floor. Repeat 5-10 times.



Stand facing a wall. Keep your upper arm close to the side with elbow at a right angle. Push your fist against the wall. Repeat 5-10 times.



Stand sideways against a wall with your upper arm close to your side and elbow at a right angle. Push the forearm to the side against the wall. Repeat 5-10 times.



Stand or sit. Hold your upper arm close to your body with your elbow at a right angle. Try to move your hand outward, resisting the movement with the other hand. There should be no movement. Hold 5 seconds. Repeat 5-10 times.



Stand or sit. Hold your arm close to your body with your elbow at a right angle. Try to move your hand inward, resisting the movement with the other hand. There should be no movement. Hold 5 seconds. Repeat 5-10 times.



Stand facing a wall with your arms straight and hands on the wall. Do push-ups against the wall keeping your body in a straight line. Repeat 5-10 times.



Gradually

- Return to your normal activities
- Resume hobbies and sports.

If you are unsure of when to progress your exercises, or you have any concerns about your injury and you do not have a further appointment with the physiotherapy team, please contact the physiotherapy department on the telephone number on the front of this leaflet.

English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

Traditional Chinese

如果您需要以其他方式了解信息，如易读或其他语种，请告诉我们。

如果您需要口译人员或帮助，请告诉我们。