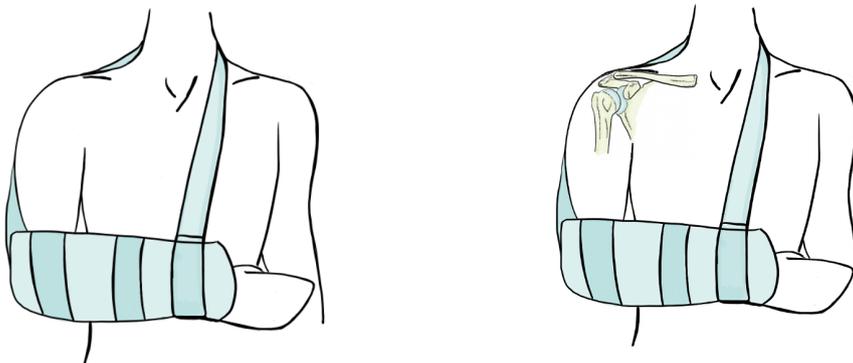


Shoulder Fractures

Fractures of the proximal humerus (Shoulder) can occur at any age and are usual as a result of a fall or accident. Some fractures can be managed in a sling, while some fractures of the shoulder require surgery.

Dr Jarrad Stevens will assess your injury and organise any x-rays and scans required. If surgery is needed, Dr Stevens will help guide you through the process for a successful outcome. This will require recovery and rehabilitation often with physiotherapists close to your home location in Melbourne.

A simple crack in the bone, while painful, will normally heal well. For children, surgery can nearly always be avoidable due to the amazing healing potential of this bone. If surgery is not required for your shoulder fracture then a sling to help hold the shoulder high and in place will be fitted for you. Follow up x-rays are normally required.



A broad arm sling is fitted, this holds the weight of the arm allowing the clavicle to heal.

If the fracture has moved the bone too much or if the broken bone is causing issues with the skin, then surgery to lock the bone back in place may be the best option. Dr Stevens will discuss this with you.



There are risks with surgery. These include infection, delayed healing or no healing of the bone. Because the shoulder involves a joint, surgery to remove plate and screws maybe required once the bone has healed. Damage to nerve or blood vessels may have occurred as a result of the injury or when fixing the fracture. Great care is taken during your surgery to ensure all of the important structures such large veins and arteries to the arm are protected as best as possible. Damage to these structures could cause serious injury.

Dr Stevens will discuss these risks with you at your consultation.

What to expect after surgery:

*You will stay in hospital overnight following your shoulder surgery and will be discharged the next day with pain relief to take for a couple of days when you need.

*You will have a dressing on your surgery site which needs to stay dry and clean for 14 days.

* You can move your hand, fingers and elbow straight away, but wear the sling provided for most of the day. The sling helps to take the weight of your arm to let the shoulder rest.

*You can begin to gently move the shoulder a couple of days after surgery but do not carry any weight or lift anything during the first 2 weeks.

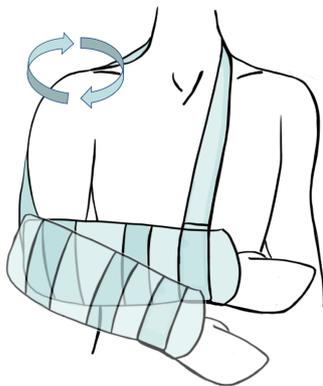
*Do not lift your shoulder above 90 degrees or lift anything heavier than a glass of water.

*After 2 weeks you will have an appointment with Dr Stevens to have your wound looked at, any stitches removed, he will then give you advice on exercises and physiotherapy.

*Physiotherapy can be helpful to get your arm and shoulder moving and strong again, but do not start this until you have had your appointment with Dr Stevens at 2 weeks.

Pendular type exercises can be started at home yourself in the first 2 weeks after surgery:

This exercise allows you to gently move the shoulder and arm in a slow circular movement several times and day. It helps keep the shoulder moving so that it does not get stiff.



Walking and gentle exercise is recommended after your surgery.

You cannot swim or start hydrotherapy until the wound has healed completely, usually at least 2 weeks

Wound review: After 2 weeks you will have an appointment with Dr Stevens to have your wound checked, any stitches will be removed. Dr Stevens will then give you advice on exercises and physiotherapy.

Driving: You cannot drive until you have had your first review appointment with Dr Stevens. He will give you an indication then when you are likely to be able to drive again

Returning to work: This depends on the type of surgery to the shoulder you have had and the type of work you do. Most surgeries will need 2-6 weeks off work, some will require longer, especially if you have a manual job.

As with all surgery, there are risks with fixing your shoulder fracture. These include infection, delayed healing or wound problems. Difficulty with pain and range of movement may also be occur. Sometimes, further surgery or surgery to removal the plate and screws is required.

- + Fever
- + Heavy bleeding or ooze from the wound
- + Increased swelling and redness around the surgery site
- + Pain in the calf muscles or difficulty breathing

If you have any of these problems, please call Dr Stevens or his rooms on **03 5752 5020**