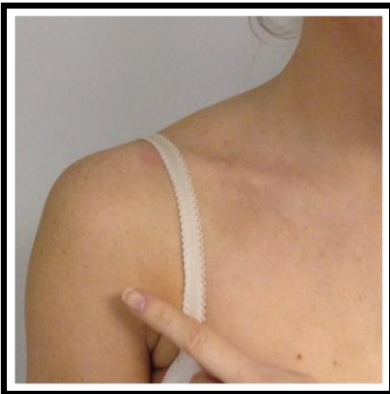


This is a follow-up letter to your recent consultation with the Fracture Care Team explaining the ongoing management of your injury. Your case has been reviewed by an Orthopaedic Consultant (bone specialist).

You have dislocated your shoulder for the first time.



About your injury: The shoulder is a ball and socket joint. During a dislocation the ball moves out of the socket. This puts strain on the tendons, ligaments and capsule (soft tissues) surrounding the joint. This should get better over time.

After a shoulder dislocation, there is an increased risk that it could happen again. This depends on age, how you injured it and individual factors. If it dislocates again, the Emergency Department should refer you back to the Virtual Fracture Clinic. We can then discuss whether you should see a shoulder specialist.

Healing: This injury normally takes 6 to 12 weeks to heal.
Use the sling for the first three weeks to allow the soft tissues to settle.

Pain: Take pain killers as prescribed always read the label; do not exceed the recommended dose). 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.

Please contact us if you have any of the following symptoms:

- Pins and needles down your arm/hand
- you are struggling to move your arm at all
- you are experiencing pain and symptoms anywhere other than at the site of the original injury or surrounding area

Using your arm: Use the sling for the first 3 weeks to allow the soft tissues to recover. It is important to keep your shoulder moving to prevent stiffness, but not to aggravate it. Please follow the management plan below.

Follow up: We do not routinely follow up patients with this injury as they normally heal well over time. **If after six weeks** of following the guidance below, you are still experiencing significant pain or are struggling to get your full range of movement back, please contact us.

If you are worried that you are unable to follow this rehabilitation plan, or have any questions, 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 top of this letter.

Please follow the management plan below

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 personal hygiene and to do your exercises ✓ Start the exercises in the ‘Initial Exercises’ below ✗ No lifting, activities or sport ✗ Avoid pushing and pulling activities
3-12	<ul style="list-style-type: none"> ✓ Reduce use of the sling to as little as possible/if at all ✓ Begin normal light activities with the arm and shoulder ✓ Increase movement as shown in the ‘Stage 2 Exercises’ section ✓ You should be able to carry out most day to day activities ✗ Heavy or overhead tasks may cause discomfort ✗ Pushing and pulling activities may continue to cause discomfort.
6+	<ul style="list-style-type: none"> ✓ Start Stage 3 Exercises as pain allows.
12	If you are still experiencing significant pain and stiffness, please contact us for further consultation.

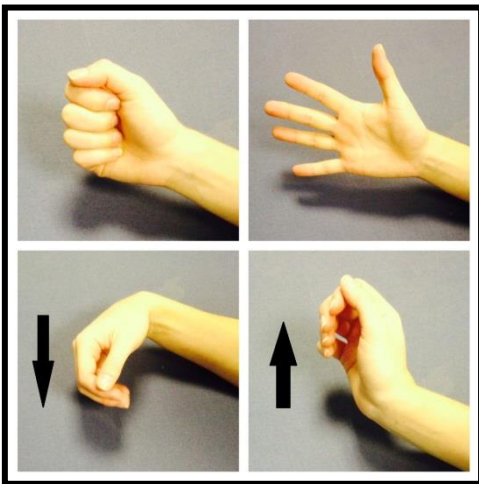
Advice for a new injury:

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 to 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.

Initial exercises (to be completed 4 to 5 times a day)

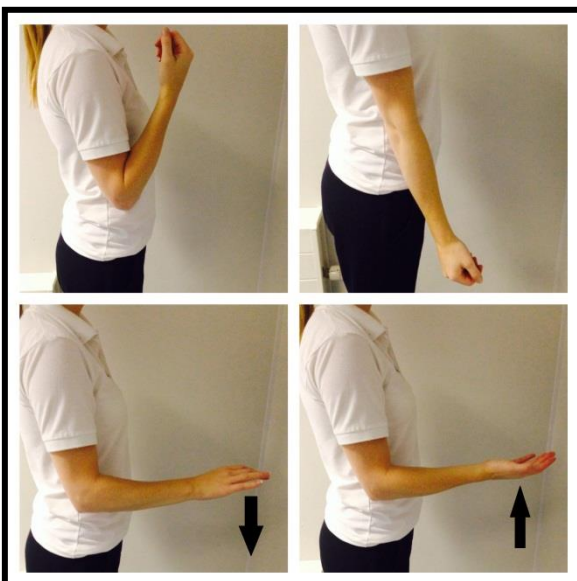
If you have stiffness in your elbow or hand from wearing the sling, you may wish to perform these exercises first. However, once they become easy, you can start with the posture and pendulum exercises.



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 or a ball of socks. Squeeze the ball as hard as possible without pain. Hold for 5 seconds and repeat 10 times.



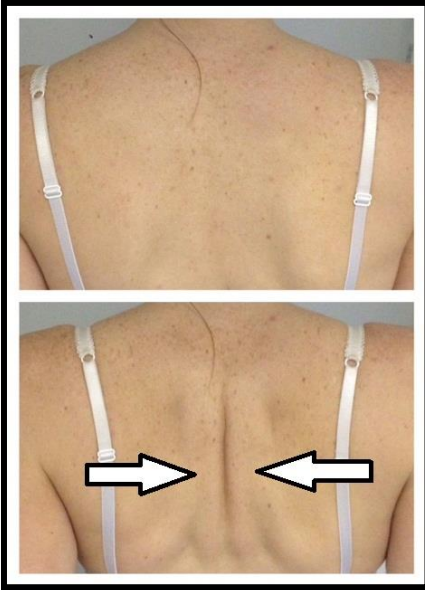
Elbow bend to straighten

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.

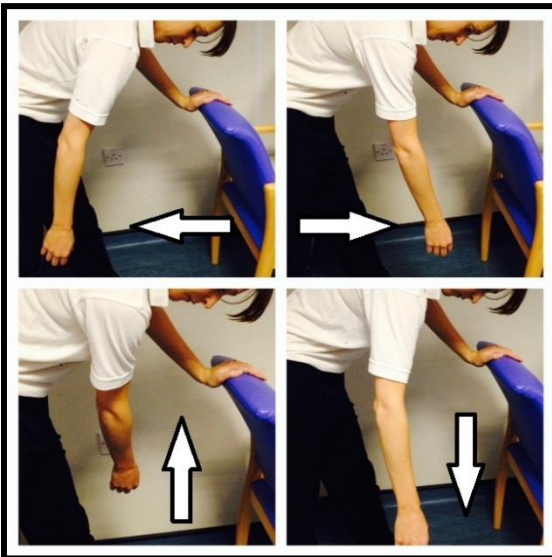
Repeat 10-15 times provided there is no increase in pain.



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 to 30 seconds and repeat 5 times provided there is no increase in pain.



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 to 2 minutes in total provided there is no increase in pain. Remember to try and relax your arm.

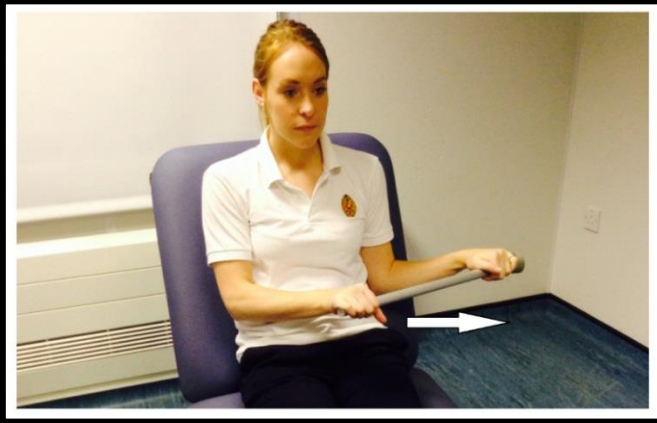
Stage 2 exercises (Start three weeks after your injury and to do 4 to 5 times a day)



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 pain.



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 do not have a stick, you could simply hold the injured arm at the wrist and guide it outwards.

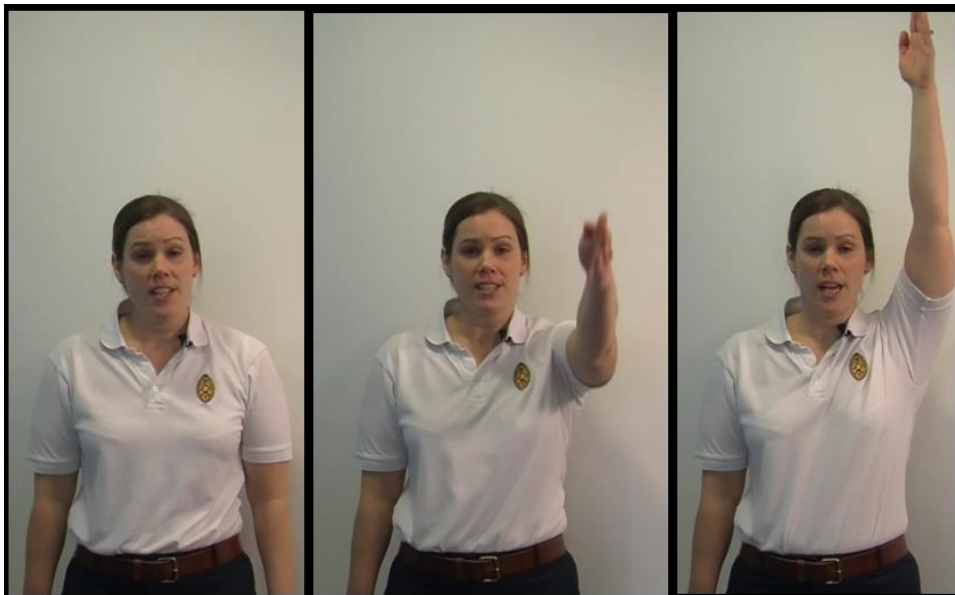
Hold for 5 seconds then return to the starting position. Repeat 10 times provided there is no increase in pain.

Stage 3 exercises (start six weeks after your injury and to do 4 to 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.

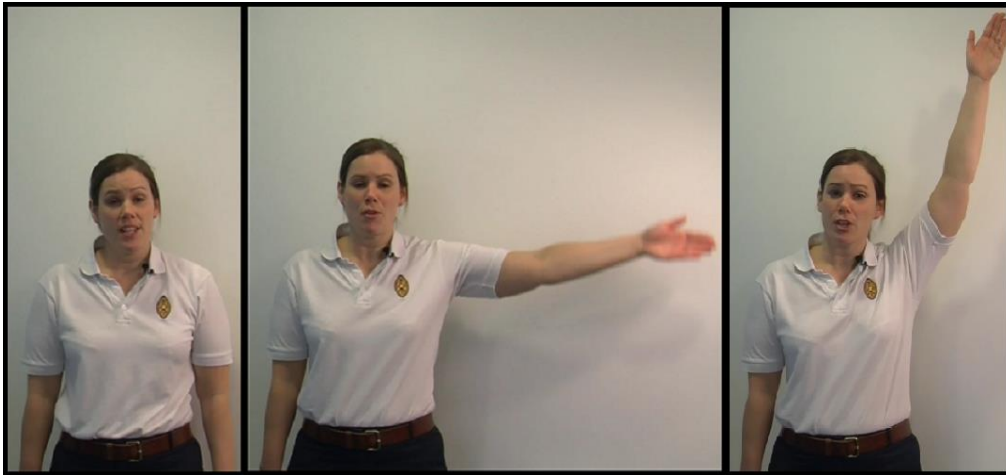
Active forward flexion:

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



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 a 90 degrees bend.



- ✓ Repeat all of these 3 exercises 10 times each, 4-5 times a day.
- ✓ Only go as far as you can naturally
- ✓ The movement will increase over time and should not be forced.

If you are having problems progressing with the exercises and have a follow-up consultation booked, please do let the clinician know so that they can review the exercises and refer you on to the Physiotherapy team if necessary.