

## SHOULDER DISLOCATION

### PATIENT INFORMATION LEAFLET

#### Dislocated shoulder

The doctor or nurse who has examined your shoulder and looked at the x-rays has found that you have dislocated your shoulder.

#### What is a dislocated shoulder?

This means your shoulder has come out of joint. This can be very painful and sometimes can put pressure on the nerves and blood vessels of the arm.

Normal Shoulder X-ray



Dislocated Shoulder X-ray



#### How will my injury be treated?

It is important that the shoulder is put back into place as soon as possible once an x-ray has confirmed the diagnosis. This is best done under sedation and/or with pain-relieving medication (Entonox or 'gas and air').

The doctor or nurse will ask you about any problems with your health, any medicine or tablets that you are taking and any allergies that you have. The doctor will explain what is to be done and answer any questions you have. You will be asked to consent to us treating your shoulder, either by showing that you agree or by signing a consent form.

If sedation is needed we will keep a check on your heart and breathing using a heart monitor. Your blood pressure will be measured. Oxygen is given by a face mask. A sedative medicine and analgesia will then be given.

The pain will ease and you may become sleepy. As your shoulder muscles relax the doctor will guide your shoulder back into place. Although you are not unconscious the medication may make you forget the procedure.

#### What are the risks of this?

In most cases the procedure is straightforward. Sometimes as the shoulder is guided back into place a new break in the bone occurs. This is uncommon (about 1 in 100 or 1%), but may occur if the underlying bone is weak. Sometimes damage to the nerve can occur. This is also rare (1%).

If you have needed sedation, you will be sleepy after the procedure so we will continue monitoring you until you are more awake.

During your time in department we advise you not to eat or drink anything to reduce the chance of you feeling or being sick.

### **Might I need a general anaesthetic?**

If your shoulder cannot be put back into place with sedation then a general anaesthetic may be needed. This doesn't happen very often (less than 1 in 20 patients). Sometimes if you have a fracture as well as a dislocation you may need a different sort of operation to put it back in place. The doctor will tell you if this is the case.

### **What happens afterwards?**

The x-ray will be repeated to check that the shoulder is back in position. The doctor will examine your shoulder again to make sure there has been no damage to the nerves around your shoulder.

When you have recovered you can go home with a sling and painkillers.

After the sedation you should not drive, operate machinery, make any important decisions or drink alcohol for 24 hours. An appointment will be made for the fracture clinic (usually the next morning) and the orthopaedic doctors will take over your further care. Your shoulder will be at greater risk of dislocating again especially in the first few weeks. It is important that you follow the advice given to you by the doctor in the fracture clinic.

### **Useful websites**

[www.nhs.uk](http://www.nhs.uk)

[www.chsft.nhs.uk](http://www.chsft.nhs.uk)

### **Contact details**

This information was correct at the time of printing. While the Trust makes every reasonable effort to keep its information leaflets up to date, very recent changes may not yet be reflected in the guidance and you should discuss this with the clinical staff at the time of your appointment.

Information is based on that available on [www.patient.co.uk](http://www.patient.co.uk).

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