## Shoulder Replacement: Before Your Surgery

You use your shoulder when you do things like reach for something on a shelf, put on a jacket, or pick up a bag of groceries. And your shoulder joint allows your arm to move.

The shoulder joint connects your upper arm bone (the humerus) to your shoulder bone (the scapula).

The top end of your upper arm bone is shaped like a ball. Muscles and ligaments hold this ball against the cup-shaped part of the shoulder bone.

Over time, the protective surfaces—called cartilage—in your shoulder can start to wear down. When the cartilage wears down, the bony surfaces of your joint rub against each other. This can cause damage and pain. It can also make it hard to use your arm.

Shoulder replacement surgery removes the damaged or worn-out parts of the joint and replaces them with metal and plastic parts.

There are two types of shoulder replacement surgeries—traditional shoulder replacement and reverse shoulder replacement. You and your doctor can discuss what's best for you.

On the day of surgery, you'll get medicine—called anesthesia. It will make you sleep and keep you from feeling pain while the doctor operates.

The surgery is done through an incision near the front of your shoulder. If you're having traditional shoulder replacement, the doctor will remove the damaged end of the upper arm bone. The doctor then will insert a metal piece that has a ball-shaped head into the end of the bone.

If needed, the doctor will also repair the cup-shaped surface of your shoulder joint. This is done by smoothing the bone. Then the smoothed area is covered with plastic or plastic and metal.

To do a reverse shoulder replacement, the doctor will remove the damaged end of the upper arm bone. Then the doctor will attach a plastic cup-shaped joint piece to the end of the bone. The doctor will also attach a ball-shaped metal piece to the shoulder bone. The ball-shaped piece on the shoulder bone will fit together with the cup-shaped piece at the end of the upper arm bone.

To finish the surgery, the doctor will close the incision with stitches, staples, skin glue, or tape strips. When you wake up, you'll have a bandage over the incision and your arm will be in a sling.

Before the surgery, tell your doctor about all the medicines and natural health products you take, especially blood thinners like aspirin. Some can raise the risk of bleeding or cause problems with anesthesia. Your doctor will tell you which medicines to take or stop before surgery.

And follow your doctor's directions for preparing for your surgery, including when you should stop eating and drinking.

Bring your photo ID, health insurance card, and any paperwork your hospital may have asked for.

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Be sure you have someone to take you home. Anesthesia and pain medicine will make it unsafe for you to drive or get home on your own.

And you will need someone to help you at home until you have more energy and can move around better.

Keep in mind that healing takes time. Your doctor will talk to you about what activities you'll be able to do while you recover.

Having surgery can be stressful. But knowing what to expect and how to prepare can help. And remember, you can always call your doctor if you have questions or concerns.

