

**ROTATOR CUFF REPAIR  
INFORMED CONSENT INFORMATION**

The purpose of this document is to provide written information regarding the risks, benefits and alternatives of the procedure named above. This material serves as a supplement to the discussion you have with your physician. It is important that you fully understand this information, so please read this document thoroughly. If you have any questions regarding the procedure, ask your physician prior to signing the consent form. We appreciate your selecting UCLA Healthcare to meet your needs.

**The Procedure:** The rotator cuff comprises muscles and tendons that surround the top of the upper arm bone (humerus) and hold it in the shoulder joint. A tear may result suddenly from a single traumatic event or develop gradually because of repetitive overhead activities. Rotator cuff tears may be partial- or full-thickness. Partial-thickness tears do not completely rupture the tendon and may respond well to non-operative treatments. Those that do not respond well or that develop into full-thickness tears may require surgery. Many full-thickness tears require surgery to correct.

There are several surgical options to treat rotator cuff tears, depending on the size, depth, and location of the tear. If other problems with the shoulder are discovered during the surgery, they will be corrected as well.

- Arthroscopy, in which miniature instruments are inserted into small incisions, can be used to remove bone spurs or inflammatory portions of muscle and to repair tears.
- A mini-open repair that combines arthroscopy and a small incision can be used to treat full-thickness tears.
- In more severe cases, open surgery is required to repair the injured rotator cuff. Sometimes, a tissue transfer or a tendon graft is used. Joint replacement is also an option.

Not all rotator cuff tears are repairable. Sometimes, the tendon has been torn for too long a period of time. This can lead to contraction of the tendon and muscle. The muscle and tendon cannot be stretched enough to be attached back to the bone. In other cases, the tendon tissue has simply worn away, and what tendon remains is not strong enough to hold the stitches necessary to attach the tendon to bone. In these circumstances, simply removing all the torn tissue and fixing any other problems in the shoulder (such as acromioclavicular

or AC joint arthritis and impingement syndrome) may reduce your pain. It will probably not increase the strength or motion of the shoulder.

## Benefits

You might receive the following benefits. The doctors cannot guarantee you will receive any of these benefits. Only you can decide if the benefits are worth the risk.

1. Increase function and range of motion
2. Increase activity level
3. Decrease chance of progression of the joint abnormality
4. Decrease pain

## Risks

Before undergoing this procedure, understanding the risks is essential. No procedure is completely risk-free. The following risks may occur, but there may be unforeseen risks and risks that are not included on this list. Some of these risks, if they occur, may necessitate additional surgery, prolonged hospitalization, and/or extended outpatient therapy to permit adequate treatment.

1. Scar tissue may prevent normal function, necessitating corrective surgery.
2. The surgery may fail to achieve the intended results, necessitating a reoperation.
3. It is possible, though unusual, to experience a bleeding episode during or after surgery. Should post-operative bleeding occur, it may require emergency treatment to drain accumulated blood (hematoma) and blood transfusion.
4. An infection is rare after surgery. Should an infection occur, treat-

- ment including antibiotics or additional surgery may be necessary.
5. Scarring may result in permanent deformity
  6. There may be temporary or permanent stiffness, swelling, and pain after the procedure.
  7. There may damage to the nerves, which could lead to tingling, numbness, pain, and weakness in the shoulder, arm, and hand.
  8. You may develop fluid collections in the joint, necessitating removal through a needle.
  9. You may experience a heart attack or stroke; blood clots may accumulate in the veins or lungs.
  10. You may develop an allergic reaction to tape, suture material, or topical preparations. Systemic reactions that are more serious may result from drugs used during surgery and prescription medicines. Allergic reactions may require additional treatment.

11. Depending on the type of surgery performed, complete healing may be prolonged.
12. In spite of the surgery, your condition may become worse.

13. Some tears cannot be repaired despite your surgeon's best efforts.

### Alternatives

The alternatives to this procedure include:

1. Non-surgical options, including:
  - Rest
  - Nonsteroidal anti-inflammatory medications
  - Strengthening and stretching exercises, as part of a physical therapy program
  - Corticosteroid injections.

- Ultrasound
2. Alteration of lifestyle

If you decide not to have this procedure, there may be associated risks to this decision. Please discuss it with your doctor.

**I discussed the above risks, benefits, and alternatives with the patient. The patient had an opportunity to have all questions answered and was given a copy of this information sheet.**

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Physician Signature

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Date

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Patient Signature

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Date

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