

Adam J. Farber, MD

Surgical consent for shoulder biceps tenodesis

All surgical procedures are associated with certain risks such as pain, bleeding, infection, scarring, damage to blood vessels or nerves, anesthetic-related complications, thromboembolic complications, and medical complications (such as heart attack, stroke, or death).

- Pain: In an effort to decrease pain you will be adequately anesthetized during surgery and will receive pain medications post-operatively.
- Bleeding: Given the fact that this is minimally invasive arthroscopic surgery, the risk of bleeding is minimal.
- Infection: The risk of infection is approximately 1%. You will receive antibiotics through your IV during surgery. In addition the surgery will be performed under sterile conditions. As a result post-operative antibiotics not routinely administered.
- Thromboembolic complications: Anytime surgery is performed, there is a theoretical risk of developing a blood clot in the legs or the lungs. This risk is approximately 1 in 10,000 cases in routine shoulder arthroscopy. As a result, the routine use of blood thinners following surgery is not routinely recommended because the risk of developing complications related to thinned blood and excessive bleeding and swelling outweighs the potential benefit of preventing a blood clot. If, however, you have a personal or family history of a blood clot or a clotting disorder, blood thinning medications are recommended; please be sure to discuss this with your surgeon. The use of compression stockings following surgery will help decrease your risk of developing a blood clot. In addition performing exercises, such as foot pumps, will also decrease the risk of developing a blood clot. Finally routine walking (but not excessive walking) after surgery will also help decrease your risk for developing a blood clot. If, however, you develop calf pain, chest pain, or shortness of breath after your surgery, please notify your surgeon immediately or proceed to the emergency department for further evaluation as these are symptoms sometime associated with the development of a blood clot.

Potential complications more unique to shoulder biceps tenodesis procedures include the following:

- Failure of tenodesis: It is possible that the biceps tendon slips out of position prior to healing. This will result in a failed tenodesis and may result in a Popeye deformity of the biceps muscle belly. Although this should not be associated with pain it may cause a cosmetic deformity. In order to limit the risk of a failed tenodesis is important to wear the sling as instructed for the first 4 weeks after surgery and follow the restrictions provided by your surgeon. Most importantly these restrictions include avoidance of any active elbow flexion and bicep strengthening exercises for at least the first 4 weeks after surgery.
- Fracture: In order to properly fix the biceps tendon to the bone of the upper arm, a hole is drilled into the bone and the tendon is secured in this hole with a screw. This hole may be a possible site for fracture especially if there is a traumatic injury. Although this complication is extremely uncommon, it has been reported in the literature.
- Failure to alleviate pain: It is theoretically possible that the surgery, although technically performed successfully, may not completely alleviate all of your symptoms.

Please print and sign your name below if you have read the information listed above and would like to proceed with surgery.

Patient Signature: _____ Date: _____

Printed Patient Name: _____