

Acromion Fracture Fixation — Pre-Operative Patient Guide

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Acromion or Scapular Spine Fracture After Reverse Shoulder Replacement — Open Reduction and Internal Fixation (ORIF)

Your Condition & Procedure

The condition

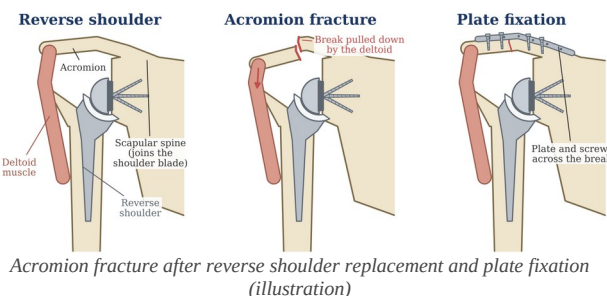
After a **reverse shoulder replacement**, the large **deltoid** muscle does the work of lifting the arm. It pulls on the **acromion**—the bony roof at the top of the shoulder blade—and the **scapular spine** behind it. These can crack, with or without a fall, causing pain at the top of the shoulder and sudden trouble lifting the arm.

The surgery

Through an incision over the top and back of the shoulder, the broken bone is lined up and held with one or two plates and screws; bone graft may be added. Your shoulder replacement itself is not changed. Because the deltoid pulls across the repair, the arm is protected for several weeks while the bone heals. The final plan is determined during surgery.

Risks & benefits

Benefits: Healing the acromion restores the deltoid's anchor so your reverse shoulder can lift the arm again. **Risks** are uncommon and include infection, blood clots, the bone not healing (more common than with most fractures), a new fracture nearby, infection of the shoulder replacement, hardware irritation that may require removal, shoulder instability, less motion and strength than before the fracture, injury to nearby structures (such as nerves or blood vessels), stiffness, persistent pain, and the need for further surgery. These will be reviewed with you in detail before surgery.



Before Surgery

- **Medications:** We will tell you what to stop and when (e.g., blood thinners, anti-inflammatories, some supplements, weight-loss injections).
- **Fasting:** Follow the instructions from your surgery coordinator/facility. In general, you should have nothing to eat or drink starting at midnight the night before surgery.
- **Nicotine:** Stop all nicotine products—they slow healing.
- **Equipment:** A sling (sometimes with an abduction pillow) is typically provided at or before surgery.
- **Physical therapy:** Schedule your first visit for within about a week after surgery.
- **Home:** Plan for a helper at first; a recliner can make sleep easier.
- **Medical history:** Let us know if you or anyone in your family has a history of blood clot disorders or a malignant hyperthermia reaction to anesthesia.
- **Health:** Call us if you develop a fever, illness, or skin problem near the shoulder.

Day of Surgery

- If instructed, take blood pressure/heart medications with a small sip of water.
- Arrive at the time given by your surgery coordinator.
- Bring your medication list, insurance card, photo ID, and sling if you have them.
- Wear a loose, button-front shirt; leave jewelry and valuables at home.
- A responsible adult must drive you home. You may **not** drive yourself.

Immediately After Surgery

- You will recover in the recovery area; many patients go home the same day, and some stay overnight.
- Your surgeon will discuss the procedure with you and your support person.
- Your care team will review wound care, restrictions, medications, follow-up, and warning signs before discharge.

Milestone	What to Expect After Surgery (General Timeline)
Sling	Worn full time for 6 weeks (8 if the repair needs extra protection), off only for hygiene and exercises. Your therapist gently moves the arm for you.
Daily life	Elbow, wrist, and hand motion right away. No lifting the arm on your own, lifting objects, pushing up from a chair, or leaning on the arm for 6 weeks. No driving while taking narcotic pain medication.
Motion & lifting	Once x-rays show healing, the sling is weaned over 1–2 weeks and lifting 1–2 lb begins. Lifting the arm on your own starts ~8 weeks, below shoulder height first.
Activity	Lifting up to 5 lb until 4 months; avoid heavy or repeated overhead lifting long term. Full release typically 4–6 months; expect less motion and strength than before the fracture.
► Please note: This is a general guide only. Post-operative instructions will be provided on the day of surgery, and your restrictions and timeline may change based on the findings and procedures performed.	

Learn More

We **strongly recommend** reading these pages from the American Academy of Orthopaedic Surgeons (OrthoInfo) before your surgery:

- **Your condition: Scapula (Shoulder Blade) Fractures** — <https://orthoinfo.org/en/diseases--conditions/scapula-shoulder-blade-fractures/>
- **Related reading: Reverse Total Shoulder Replacement** — <https://orthoinfo.org/en/treatment/reverse-total-shoulder-replacement/>

Questions before surgery? Call our office at (972) 378-1438. For a medical emergency, call 911.