

SUMMARY

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The developement and application of arthroscopic techniques in the glenohumeral joint have revolutionized shoulder surgery. Shoulder arthroscopy necessitates attention to details. Adopting a comfortable setup that includes a plan for every detail, including the surgeon's position, the patient's position and the types of fluids and equipment necessary, adds to the smooth flow of the operation even when the surgical plan changes to open surgery.

Proper portal placement is critical for successful and safe arthroscopic surgery. Multiple portals, their safe location and familiarity with these portals are necessary for evolving surgical procedures.

Shoulder arthroscopy is well estabilished as a diagnostic and therapeutic procedure. It carries a greater degree of accuracy than conventional imaging techniques, and in addition allows assesement of the degree of mechanical derangement inside the joint, it can be used for diagnosis and treatement of many joint disorders such as, anterior shoulder instability, labral tears, impingement syndrome in

the throwing athletes, synovial diseases of the shoulder, rotator cuff tears and calcification, and biceps tendon lesions.

It should be emphasized that arthroscopic procedures should serve as adjuncts to and not as replacements for thorough clinical evaluation. Arthroscopy is not a substitute for clinical skills.

Lastly, it is to be hoped that this essay is well satisfying and gives sufficient ideas about the subject (Shoulder Arthroscopy) all inclusive.