



Evidence Based Intervention Arthroscopic Sub-acromial Decompression July 2024 v2.0

Document Owner:	Dr Rachel Joyce – Medical Director	
Document Author(s):	Clinical Policies Group	
Version:	v2.0	
Approved By:	HWE ICB Commissioning Committee	
Date of Approval:	11 th July 2024	
Date of Review:	July 2026 If the review date has exceeded, the published policy remains valid	

Policy: Arthroscopic sub-acromial decompression

This policy is a local supplement to the national EBI programme guidance on arthroscopic shoulder decompression for subacromial shoulder pain. See https://ebi.aomrc.org.uk/. It aims to provide clarity on the definition of persistent symptoms despite appropriate non-operative management.

Shoulder arthroscopy for other indications is outside the scope of this policy. Please refer instead to the local Shoulder Arthroscopy policy.

Criteria

Primary care or MSK community service referral can be considered for surgical opinion for patients who meet ALL the following criteria –

- Patient has had symptoms for at least 6 weeks from the start of treatment.
- Symptoms are intrusive and debilitating (for example waking several times a night, pain when putting on a coat)
- Patient has been compliant with conservative intervention (education, rest, NSAIDs, simple analgesia, appropriate physiotherapy) for at least 6 weeks.
- Patient has initially responded positively to a steroid injection, but symptoms have returned despite compliance with conservative management.
- Referral is at least 8 weeks following steroid injection.
- A shared decision-making conversation has taken place and the patient confirms they
 wish to have surgery.

Patients who are not eligible for treatment under this policy may be considered on an individual basis where their GP or consultant believes exceptional circumstances exist that warrant deviation from the rule of this policy. Individual cases will be reviewed as per the ICB policy.

References

1. Royal College of Surgeons/BESS/BOA (2014) Commissioning guide: Subacromial Shoulder Pain

Change History:

Version	Date	Reviewer(s)	Revision Description
v1.1	November 2023	M Skerry	Inactive web link removed
v2.0	July 2024	S Chepkin	Rolling over for 2 years as this is a national EBI policy which is unchanged

DOCUMENT CONTROL

This is a controlled document. Whilst this document may be printed, the electronic version posted on the intranet is the controlled copy. Any printed copies of this document are not controlled. As a controlled document, this document should not be saved onto local or network drives but should always be accessed from the website.

Do you really need to print this document? Please consider the environment before you print this document and where copies should be printed double-sided. Please also consider setting the Page Range in the Print properties, when relevant to do so, to avoid printing the policy in its entirety.