Objectives

- Discuss common Shoulder diagnosis seen in Primary Care Medicine
  - Rotator cuff Syndrome
  - Adhesive capsulitis
  - Scapular dyskinesia
  - AC joint pain
- Review Physical examination of the Shoulder and Cervical Spine
- Discuss and demonstrate techniques used in treating common shoulder diagnosis

The Shoulder
Shoulder Physical Exam

- Inspection
- Palpation
- Range of Motion
- Muscle Strength testing
- Special tests
- Cervical Spine Exam

Shoulder Physical Exam

- Inspection → shirts off, atrophy, superior elevation at AC joint, lateral hollow, scapula, posture

Shoulder Physical Exam

- Palpation → note any tenderness at AC joint, proximal humerus (in children this may represent stress fracture), clavicle, tender points along trapezius, levator scapulae, rhomboids, serratus anterior, latissimus, biceps tendon
Shoulder Physical Exam

• Range of Motion →
document forward
  flexion and abduction,
  painful arc, IR, ER

Shoulder Physical Exam

• Muscle strength testing
  – Deltoid, biceps, triceps
  – Rotator Cuff
  • Supraspinatus
  • Infraspinatus
  • Teres minor
  • Subscapularis

Shoulder Physical Exam

• Special Tests
  – Impingement signs → Hawkin’s and Neer’s
  – Yergason’s and Speed’s
  – Obrien’s
  – Apprehension Test
  – Labral Probing
  – Anterior Slide
Cervical Spine Exam

- ROM
- Muscle strength testing
- Spurling’s
- Lhermitte’s
  - Radicular symptoms from the neck may mimic shoulder pain
  - Dermatome patterns

Rotator Cuff Impingement Syndrome

- Chronic Tendinopathy
- Relationship of subacromial space, rotator cuff and Acromion
- Physical Therapy
- Sub-acromial bursa Injection
- Pain at night in bed when rolled upon
Adhesive Capsulitis

- Decreased Range of Motion
- Diabetic patients
- Long Rehab
- Intra-articular Glenohumeral Joint Injection

AC joint

- DJD
- Injection
- Surgery (SAD/DCE)
- Distal Clavical Osteolysis
- Young aggressive weight lifters
- MRI
- Rest
- Injection

AC joint Separation

- Traumatic
- X-ray- compare to other side with and without weights
- Grade
- Rest
- PT
- Surgery
Scapular Dyskinesis

- Inspection is the key (shirts off)
- Shoulder Girdle musculature very important in treating shoulder pain
- Asymmetry right to left
- Throwing Athletes

Diagnostic Studies

- X-rays → AC sprains, Glenohumeral and AC DJD, Acromial Type, Fractures, C-Spine
- MRI
- MRI with Arthogram
  - Previous surgery, young high level throwing athletes

Additional Treatment Options

- Physical Therapy
- NSAIDS
- Injection Therapy
  - Intra-articular
  - Sub-Acromial Bursa
  - AC Joint
Shoulder Injections

- Sub-Acromial Space
- AC joint
- Glenohumeral joint
- Biceps tendon sheath
- Ultrasound Guidance vs. Blind injections
- Depo-Medrol or Kenalog and Lidocaine/Marcaine

Ultrasound Evaluation

- Home Base: Biceps tendon in bicipital groove
- Rotator cuff
- AC joint
- Posterior labrum
- Glenohumeral joint
- Suprascapular nerve

Rotator interval

![Image of Rotator interval](image-url)
Rotator Cuff

Ultrasound  MRI

Bibliography