

10 MinuteMoment

MUSCULOSKELETAL EXAM FOR SHOULDER PAIN



Faculty development
<i>The key goal for the initial assessment of shoulder pain is to find pathology that will need urgent imaging and / or referral to orthopedics. The physical exam helps to identify the possible source of the pain (from the shoulder or the neck, or referred pain). Shoulder maneuvers that isolate individual muscles of the rotator cuff can be combined to increase or decrease the pre-test probability of shoulder pathology.</i>
Atrophy of the affected supraspinatus muscle indicates a more chronic process.
The rotator cuff comprises tendons of the supraspinatus (for abduction), infraspinatus (for external rotation) plus the teres minor and subscapularis (SITS) muscles.
If the patient can initiate active movement and perform full active range of motion, it is not necessary to test for passive range of motion.
Test for Impingement - The tests for impingement aim to reproduce of the shoulder pain by compressing the rotator cuff between the head humerus and the acromion. The absence of the signs decreases the probability of subacromial disease. Common tests are: * NEER'S SIGN: passive painful arc of the extended arm "near the ear" * HAWKIN'S SIGN: flexion with internal rotation to elicit * YERGASON'S TEST: looking for injury of the biceps (actively resisting supination)
<i>For additional information on these shoulder tests, the SBM 5 Minute Moment is here</i>
- The Shawl test is used to test for acromio-clavicular joint arthritis.
Test for Supraspinatus Strength * EMPTY CAN TEST: have the patient abduct the arm, extend the elbow, and internally rotate ("thumb down") the arm (like emptying a soda can). With the affected arm in that position, have the patient lift against the examiner's resistance.
Test for Infraspinatus Strength * STRENGTH TESTING: have the patient flex elbows and pinch arms against their own side (like sitting in a tight airplane seat). Press the dorsal surface of the hand outward against an examiner's resistance (as if opening a newspaper).

<i>This patient presents with SHOULDER PAIN on the left side. Please examine them to decide what further management is needed.</i>			
	PHYSICAL EXAM TECHNIQUE	Y / N	AREAS FOR FEEDBACK
INSPECTION	Observe the patient * Did the learner directly observe the patient's shoulders? * Did the learner evaluate the anterior and posterior muscle tone? * Did the learner comment on any scars or skin changes? * Did the learner specifically observe the painful area reported?		- Learner does not expose the patient's shoulder. - Learner does not examine the anterior and posterior shoulders.
	Palpate the shoulder muscles * Did the learner have a systematic approach to palpate the shoulder? Palpate the bones and bursae * Did the learner palpate the clavicle? * Did the learner palpate the scapular spine and the acromion? And the acromion bursa? * Did the learner palpate biceps and coracoid?		- Learner does not have a systematic approach to assess the muscles of the shoulder. - Learner does not include the neck in the exam. - Learner does not palpate the clavicle and bursae. - Learner's palpation is too light to detect abnormalities.
RANGE OF MOTION	Examine the shoulder range of motion		
SPECIAL MANEUVERS	Perform provocative maneuvers * Did the learner evaluate for impingement? * Did the learner evaluate for AC joint arthritis?		- Learner did not check each of the muscles of the rotator cuff? - Learner did not include the exam of the biceps
	Examine the rotator cuff muscles * Did the learner isolate and test the supraspinatus, infraspinatus, and the subscapularis muscles?		
	Did the learner have an organized and structured approach to the exam?		
	Did the learner maintain the patient's comfort and well being?		