

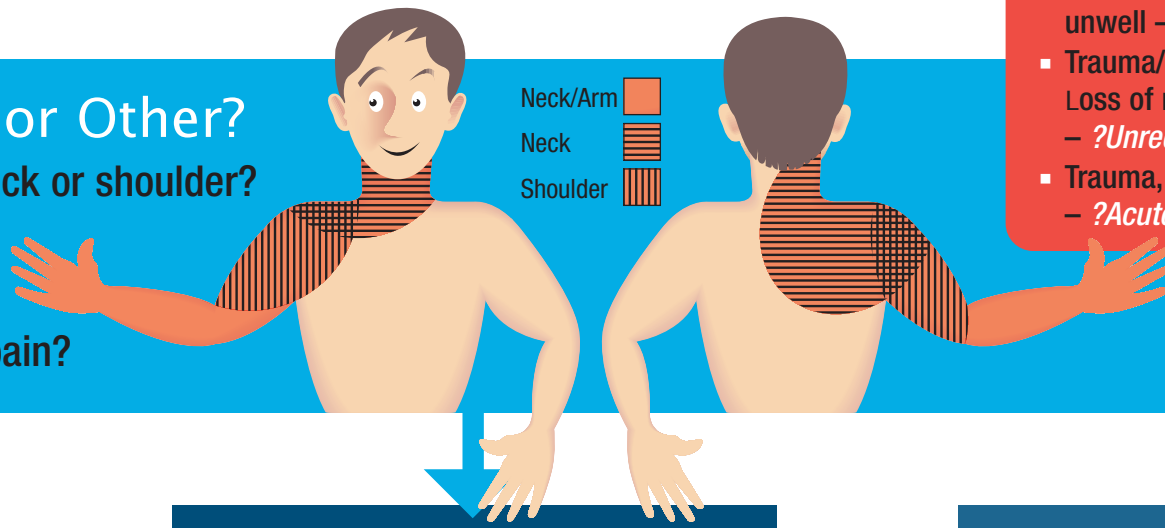
Diagnosis of shoulder problems: With guidelines for initial management

Red Flags – urgent referral

- Any mass or swelling – ?*Tumour*
- Red skin, fever or systemically unwell – ?*Infection*
- Trauma/epileptic fit /electric shock
Loss of rotation and abnormal shape
– ?*Unreduced dislocation*
- Trauma, pain and weakness
– ?*Acute cuff tear*

Neck or Shoulder or Other?

- Symptoms localised to neck or shoulder?
- Move the neck and then the shoulder.
- Does this reproduce the pain?



Neck

Common Age 35+

Management

- Perform neurological examination. If positive findings then refer
- Rest
- NSAIDS/analgesia
- Physiotherapy

Shoulder

History of instability?

- Has your shoulder ever partly or completely come out of joint?
- Are you worried that your shoulder may dislocate or slip in the joint on sporting activity or on certain movements?

Other Neck or Arm

Common Age 35+

Management

- Rest
- NSAIDS
- Physiotherapy

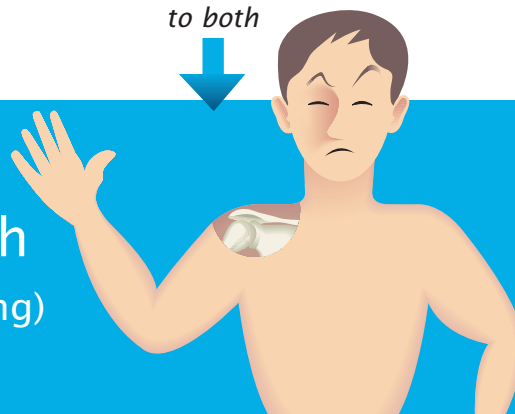
Instability

Common Age 10–35 years

Management

- Refer
- Surgery

Is the pain localised to the AC joint and associated with tenderness? (There may be swelling)



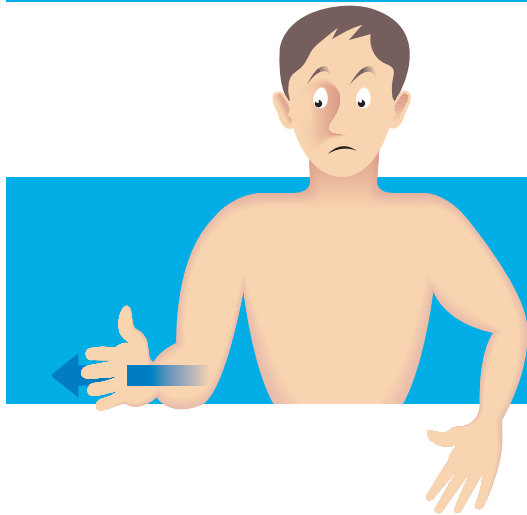
Acromioclavicular Joint Disease

Uncommon
Common Age 30–50 years

Management

- Rest
- NSAIDS/analgesia
- Consider Cortisone Injection
- Refer
- Surgery

Reduced Passive External Rotation



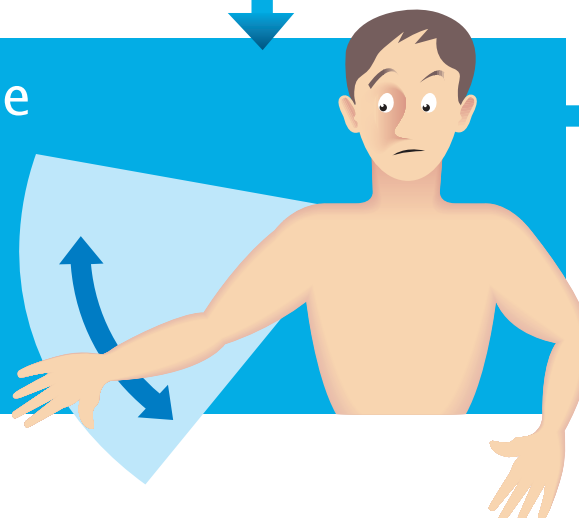
Glenohumeral Joint

Frozen Shoulder Common Age 40–60 years
Arthritis Uncommon
Common Age 60+

Management

- Rest
- NSAIDS/analgesia
- X ray
- Cortisone injection
- Refer
- Surgery

Pain on abduction with the thumb down
Worse against resistance
Painful arc



Rotator Cuff/Impingement

Common Age 35–75 years

Management

- Rest
- NSAIDS/analgesia
- Cortisone injection
- Consider Physiotherapy
- Refer
- Surgery

Other Neck or Arm pain

Common Age 35–75 years

Management

- Rest
- NSAIDS/analgesia
- Physiotherapy
- Refer



OXFORD
Shoulder & Elbow
CLINIC