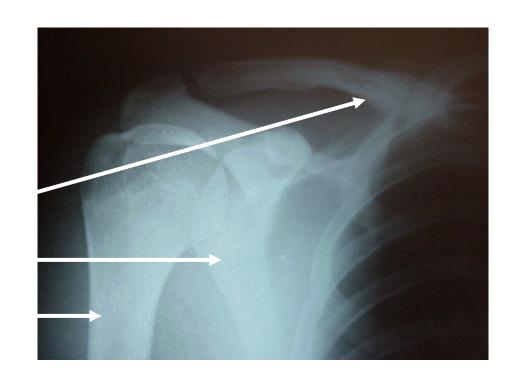
Shoulder Injury Evaluation

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Basic Anatomy & Kinesiology

• 3 Bone Structures

- •Clavicle
- •Scapula
- •Humerus



Evaluation Principles

- Always follow a standard progression
 - Determine the target tissue
 - What area is injured
- Get a History
 - is this a new injury, old chronic injury
- Assessment
 - Correlate signs, symptoms, biomechanical info

- Assessment
 - what is the primary problem?
- Plan
 - Treatment
 - Referral
 - Short and Long Term Goals
- Follow up

- Always follow the same plan
- Evaluation Order

History

Observation

Palpation

Stress

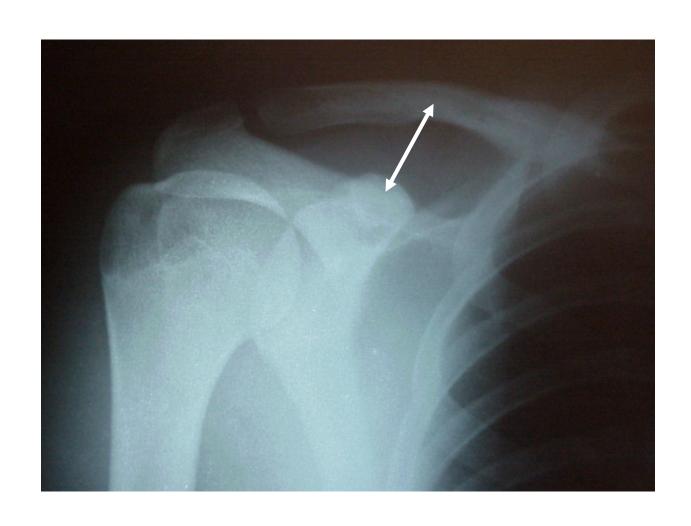


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6 Articulations or Joints

- Coraco Clavicular
- Sterno Clavicular
- Acromio Clavicular
- Gleno Humeral
- Scapulo Thoracic
- Sub Acromial Space

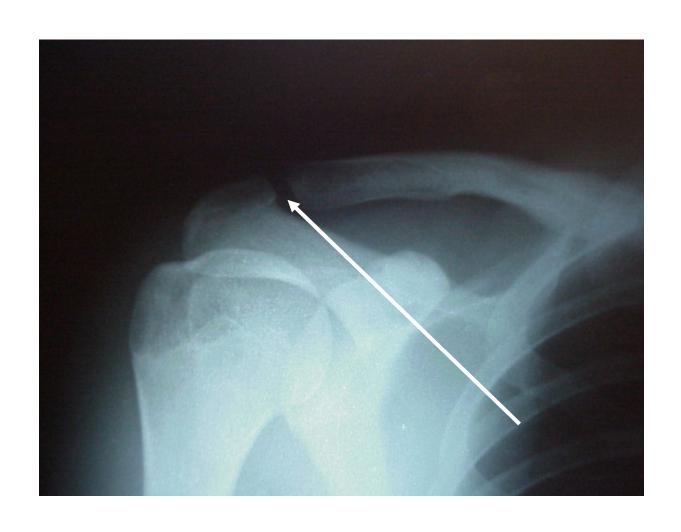
Coraco Clavicular



Sterno Clavicular



Acromio Clavicular

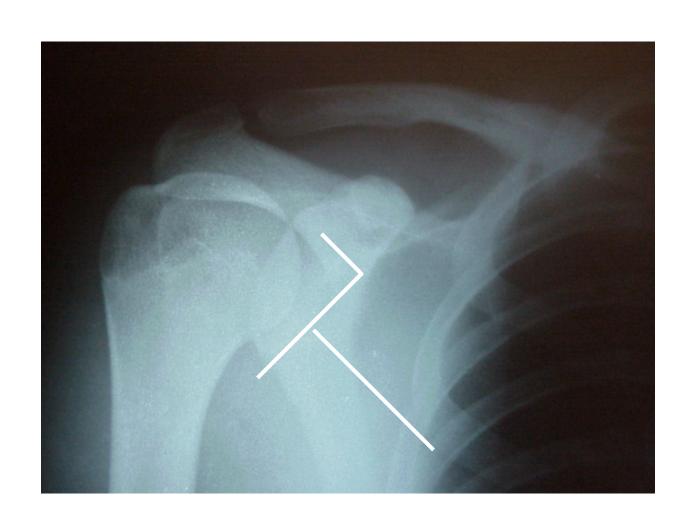


A/C Joint

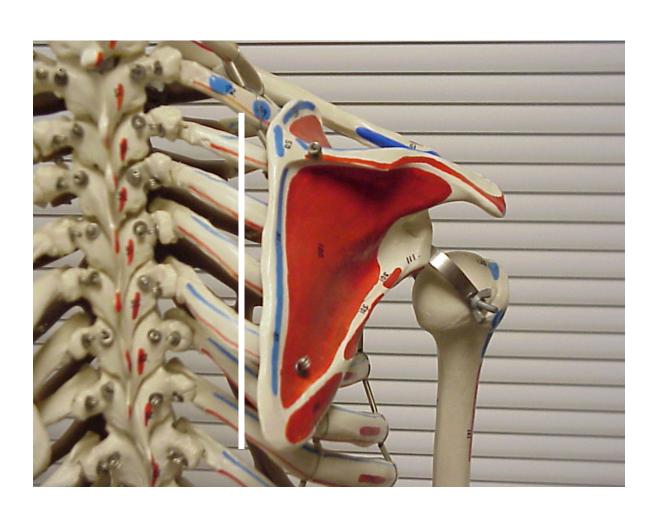


Grade 1+ A/C Separation

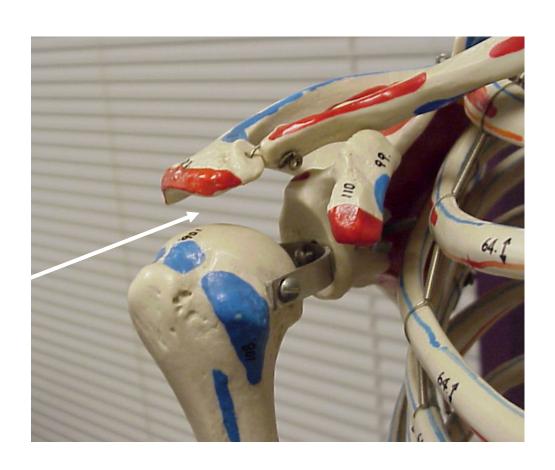
Gleno Humeral



Scapulo Thoracic



Sub Acromial



Functional Stability

- Shoulder is very unstable from a bony standpoint
- Stability is almost totally dependent upon the synergism of the musculotendinous units
- The only true bony articulation to the thorax is the S/C Joint

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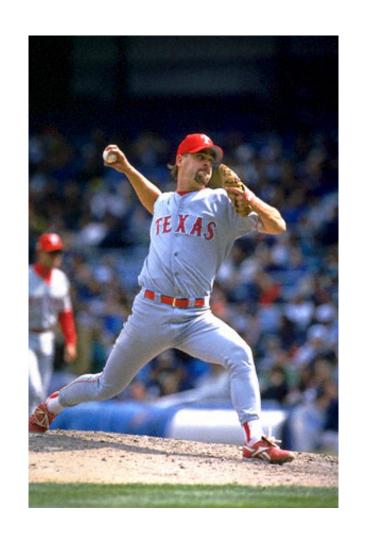
Muscles

• 15 muscles move and stabilize the scapula

• 9 muscles provide for GH motion

• 6 support the scapula on the thorax

The muscles and a lack of restrictive bony or ligamentous structure give the shoulder tremendous range of motion.



It also makes the shoulder very vulnerable to outside forces.



Anterior Capsule

- •Subscapularis Tendon
- •Labrum
- Anterior Capsular Ligaments
 - •Coraco Humeral, GH, Inferior GH Ligament
 - •Inferior may be the most important ligament in the shoulder
- Anterior Synovial pouches and bursae

Rotator Cuff Muscles

- Supraspinatus abduction
- Infraspinatus external rotation
- Teres Minor depression, external rotation, extension

Spells SIT

• Subscapularis - internal rotation

Cuff Functions

- Anterior Posterior Stability
- Internal and External Rotation
 - eccentrically and concentrically
- Elevation Depression
- Protraction
- Retraction
- Joint Translation

•Fine Tuners

Stabilizers

•Maintain joint contact areas

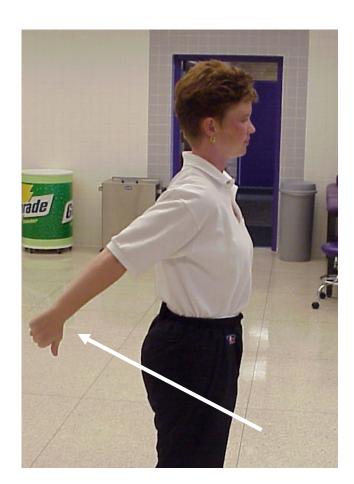
Movements

- Flexion
 - 90 degrees
- Primary Flexors
 - Anterior Deltoid
 - Coracobrachialis
 - Pectoralis Major
 - Biceps



Movements

- Extension
- Primary Extensors
 - Latissimus dorsi
 - Teres Major
 - Teres Minor
 - Triceps



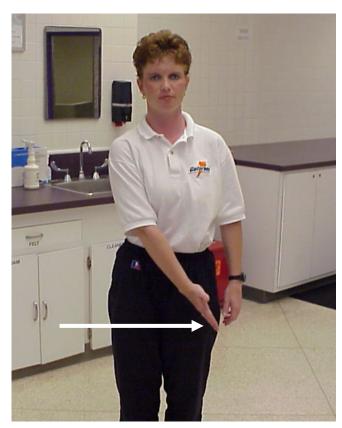
Abduction

- Primary Abductors
 - Supraspinatus
 - Mid Deltoid
 - Serratus Anterior
 - Infraspinatus



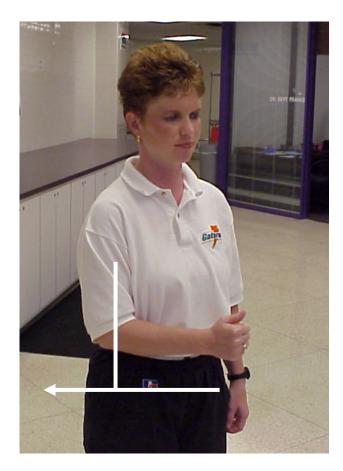
Adduction

- Primary Adductors
 - Anterior Deltoid
 - Pectoralis Major
 - Subscapularis



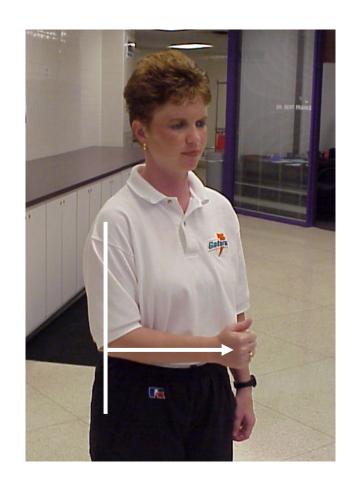
External Rotation

- Primary External Rotators
 - Posterior Deltoid
 - •Infraspinatus
 - •Teres Minor



Internal Rotation

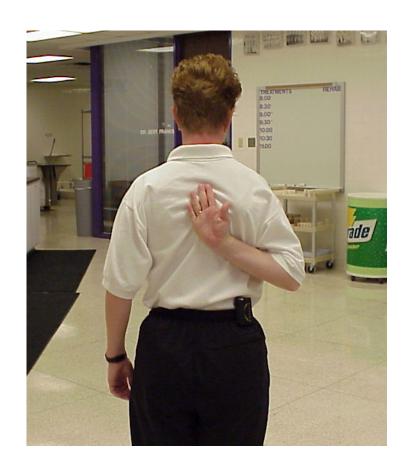
- Primary Internal Rotators
 - Subscapularis
 - Pectoralis Major
 - Latissimus Dorsi
 - Teres Major
 - Anterior Deltoid



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Internal Rotation

The body limits internal rotation - thus placing the arm behind the body increases the amount of internal rotation



Evaluation Tests

• Yergason Test 1



•Yergason Test 2



Yergason Test

Positive Findings

pain

popping

Transverse Humeral Ligament

Long Head of the Biceps irritation

•Speed's Test



Speed's Test

Positive Findings

Pain

Weakness

Long Head of Biceps Tendon

•Drop Arm Test



Drop Arm

• Findings

Pain

Dropping of Arm

Supraspinatus Tendon

•Apprehension Test

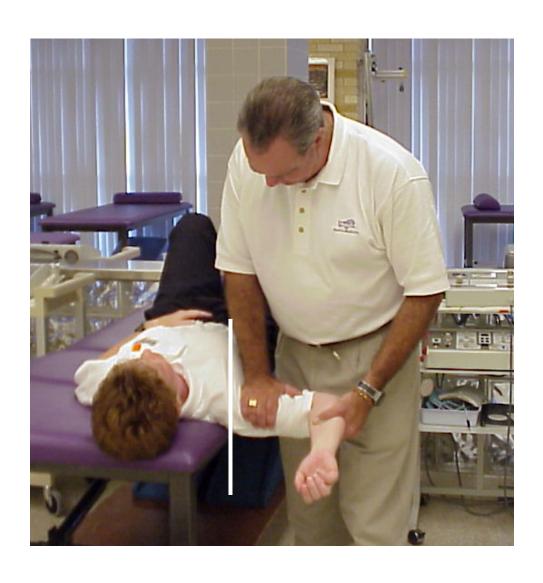


Apprehension Test

Positive Findings

- Pain
- Feeling of Apprehension about the shoulder potentially re subluxating or dislocating

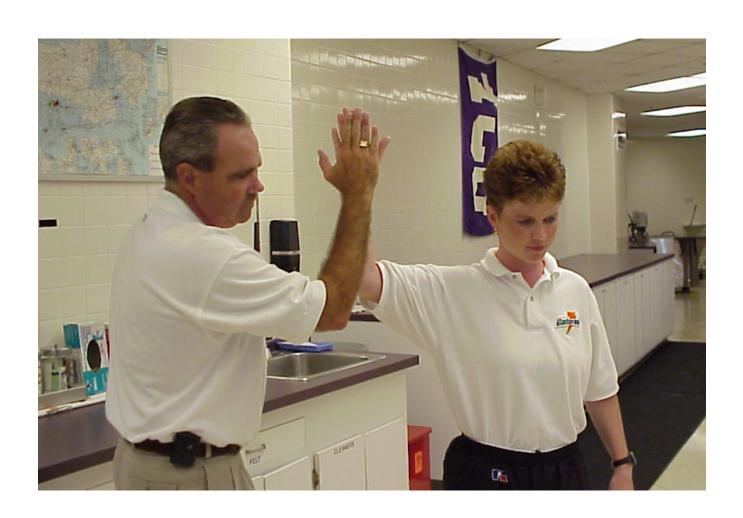
•Relocation Test - Fowler's Test



Relocation Test

• The relocation test eliminates the pain found with an apprehension test. This test acts to re center the Humerus in the Glenoid Fossa

•Throwers Test



Throwers Test

• Reproduces anterior capsule pain which is indicative of anterior capsular laxity

•Rowe Test



Rowe Test

Multi Directional Instability

Very similar test to the Sulcus Test and it also produces a Sulcus sign

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•Empty Can Test



Empty Can

• Specific for trauma to the Supraspinatus muscle

- tendon irritation
- impingement and or tear

•Impingement Test





Primary

Secondary

Impingement

• Does not occur singularly in a bio mechanical sense

Joint Laxity

Outside trauma

•Adson, Allen Test - Maneuver



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Adson's, Allen Test

• Thoracic Outlet Syndrome

•Stress Testing Joints

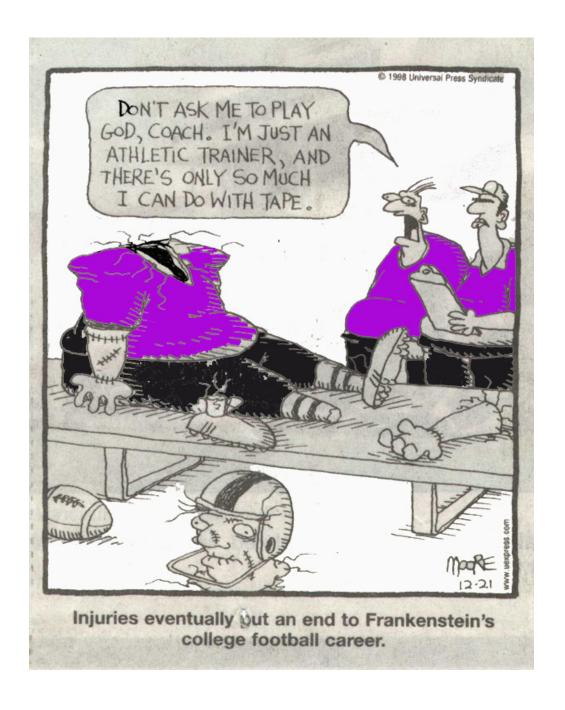
A/C Joint Stress Testing

Counter force weights should be applied to the wrist and not gripped.

Bilateral X-Ray comparisons are required

•MRI Scans





T. Ross Bailey

Associate Athletic Director

Director of Sports Medicine

&

Athletic Training