



Steadman Hawkins Clinic of the Carolinas

Clinical Approach to Shoulder Pain



Pain Control

- Ice
- Topicals
- Non-steroidal anti-inflammatory drugs^{1,2}
- Acetaminophen³
- Narcotics³

Physical Therapy

- Regain motion
- Strengthen
- Return to full activity

Injections

- Diagnostic/therapeutic
- Anesthetic/corticosteroid
- Subacromial
- Intra-articular viscosupplementation

¹ Caution if used in those with cardiovascular conditions, particularly those at risk for bleeding

² Caution if used in those with gastrointestinal, kidney and/or high blood pressure conditions

³ Caution if used in those with liver conditions

⁴ Highly addictive medication needing regular monitoring

Exercises to Perform Until Seen by a Physical Therapist (does not replace supervised physical therapy)

Exercise 1. Lie on back. Push arm straight up toward ceiling. Keep elbow straight. Slowly and controlled, lower shoulder blade back to table.



Exercise 2. Lie on back with elbow at side bent to 90 degrees. Slowly and controlled, rotate hand away from body. Slowly return hand toward belly button.

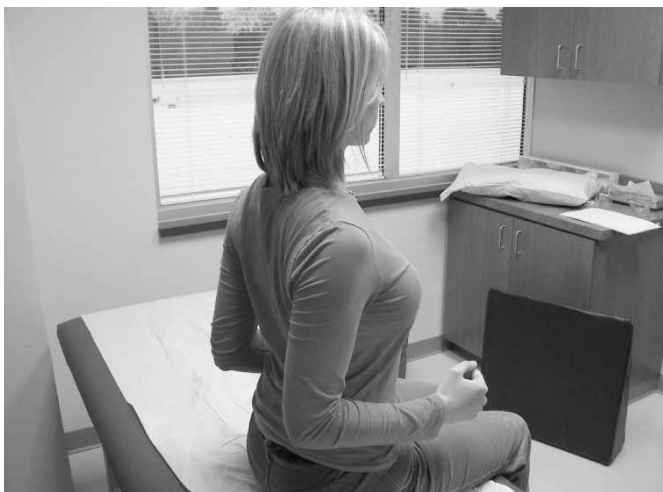


Continued on back

Exercise 3. Lie on side with elbow at side bent to 90 degrees. Slowly and controlled, rotate hand toward ceiling. Slowly return hand toward belly button.



Exercise 4. Sit with good posture. Slowly and controlled, squeeze shoulder blades together and down. Do not shrug shoulders upward.



Perform 30 repetitions of each exercise. If any exercise causes pain, stop the exercise until you have been seen by the physical therapist.

Tracking Your Clinical Course

Initial Consultation

X-ray/MRI _____

Diagnosis _____

Intervention _____

Initial Follow-up Visit (approx. one month)

Initial response and questions for the doctor. You will be seen by the doctor and the physical therapist at this important visit.

Date: _____ Time: _____

Location: _____