

## Shoulder Conditions

16/01/2017

CONDITIONS	OPTIONS
Bursitis Impingement* Tendonitis / Calcific tendonitis LHB pathology Rotator cuff pathology* Massive Tear OA: GH Jt* / AC Jt *Follow Criteria Based Access for surgery <a href="https://www.bristolccg.nhs.uk/innf">https://www.bristolccg.nhs.uk/innf</a> Adhesive capsulitis. Labral Tear Instability	Xray USS / USS+ INJ MRI Inject diagnostic / therapeutic MRI arthrogram Surgery Physiotherapy Other? bloods / meds. Nothing Pain clinic

Condition	Injection / location	options
Bursitis	Sub acromial (SAS)	Uss +/- inj; PT, ( <b>normalise movement restore function</b> ); SAD
Impingement	Usually SAS, can be anterior (LHB)	X-ray; Uss +/- inj; PT, ( <b>normalise movement restore function</b> ); *CBA -SAD +/- ac jt excision
Tendonitis / osis	SAS	PT;USS; occ SAD
Calcific tendonitis	SAS +/-USS guided Barbotage	X-ray; Excision; occ SAD
LHB pathology	Groove or GH jt	USS;PT; tenotomy
Rotator cuff pathology	Not full thickness tear	X-ray; USS +/- inj; PT, ( <b>normalise movement restore function</b> ); *CBA -SAD / Repair +/- clav excision
Massive Tear	Occasionally for pain	X-ray; USS; PT, ( <b>optimise function</b> ); *CBA arthroscopic debridement.
OA: GH Jt / AC Jt	GH jt or ACjt	X-ray; USS+/- inj (AC); PT, ( <b>optimise movement restore function</b> ); AC jt excision ;TSR
Adhesive capsulitis.	GH jt early/late phase	PT according to stages; capsular release
Labral Tear	no	MRA