

## Shoulder Conditions

2017

CONDITIONS	OPTIONS
Bursitis / SAS Impingement <b>CBA*</b> *Follow Criteria Based Access for surgery <a href="https://www.bristolccg.nhs.uk/innf">https://www.bristolccg.nhs.uk/innf</a> <ul style="list-style-type: none"> <li>• Tendonitis / Calcific tendonitis</li> <li>• LHB pathology</li> </ul> Rotator cuff Tear. Massive Tear OA: GH Jt / AC Jt 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 <b>CBA*</b> <a href="https://www.bristolccg.nhs.uk/innf">https://www.bristolccg.nhs.uk/innf</a>
Impingement	Usually SAS, can be anterior (LHB)	X-ray; Uss +/- inj; PT, ( <b>normalise movement restore function</b> ); <b>CBA*</b> -SAD +/- ac jt excision
Tendonitis / osis	SAS	PT;USS; occ SAD <b>CBA*</b>
Calcific tendonitis	SAS +/-USS guided Barbotage	X-ray; Excision; occ SAD
LHB pathology	Groove or GH jt	USS;PT; tenotomy
Rotator cuff TEAR	Not full thickness tear	X-ray; USS +/- inj; PT, ( <b>normalise movement restore function</b> ); Repair / SAD +/- clav excision
Massive Tear	Occasionally for pain	X-ray; USS; PT, ( <b>optimise function</b> ); * <b>CBA</b> 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, Hydrodilation /USS
Labral Tear	no	MRA