| Shoulder Pain | Referral Guide: Page 1 of | Rheum |
|---|------------------------------|--|
| Diagnosis/Definition: | | |
| Pain in shoulder often with limitation in ROM | | |
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| Initial Diagnasia and Managamanti | | |
| Initial Diagnosis and Management: A complete H and P should be done. | | |
| Xray of the affected shoulder | | |
| Nsaids and PT should be tried before referral | | |
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| Ongoing Management and Objectives: | | |
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| Indications for Specialty Care Referral: | | |
| Failure of conservative approach including Nsaids (if not contraindicated) and PT | | |
| Patient may also be referred to Ortho for management of shoulder pain | | |
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| Test(s) to Prepare for Consult: | | Fest(s) Consultant May Need To Do: |
| Xray of shoulder | - Ir | njection |
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| Criteria for Return to Primary Care: | | |
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| If conservative treatment fails (Nsai | ds, PT, Injections) ac | d MRI and Ortho referral are often indicated |
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| Revision History: Created Revised | | |

Disclaimer: Adherence to these guidelines will not ensure successful treatment in every situation. Further, these guidelines should not be considered inclusive of all accepted methods of care or exclusive of other methods of care reasonably directed to obtaining the same results. The ultimate judgment regarding the appropriateness of any specific procedure, therapy, or referral must be made by the physician/provider in light of all circumstances presented by an individual patient.