Shoulder & Neck Exam
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History
- Duration
- Location
- Radicular
- Injury/trauma
- Aggravating/alleviating factors
- Night pain
- Numbness/tingling/weakness
- Occupation/activities
- Dominant hand
- Hx of shoulder issues

Physical Exam
- Inspection
- Palpation
- ROM
- Strength
- Special tests
- Neurovascular exam
- **Always examine c-spine w/ shoulder**

Shoulder

Inspection
- Atrophy
- Shoulder asymmetry
- Swelling
- Ecchymosis
- Erythema
- Posture

http://www.foundrysportsmedicine.com/our-blog/109741/Anterior-Shoulder-Instability
Palpation

Bony:
• SC joint
• Clavicle
• AC joint
• Acromion
• Greater tuberosity
• Coracoid process
• Spine of scapula
• Humerus
• C-spine

Soft tissue:
• Short/long head of biceps
• Subacromial bursa
• Muscles of shoulder
• Periscapular muscles
• Anterior/posterior capsule

Range of Motion

Passive = 0% effort by patient
Active = 100% effort by patient

• Forward flexion: 160-180°
• Lateral abduction: 160-180°
• External rotation arm at side: ~90°
• External rotation w/ arm abducted 90°: ~90°
• Internal rotation w/ arm abducted 90°: ~70°
• Internal rotation: ~T7

Rotator Cuff

RC Strength

• Teres minor/infraspinatus: External rotation w/ 90° elbow flexion
• Subscapularis: Internal rotation w/ 90° elbow flexion
• Subscapularis: lift off or belly press
• Supraspinatus: empty can; 90° abduction, 30° forward flexion w/ thumb down

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**Signs/Special Tests: Impingement**

**Neer:**
- Abduction of pronated arm w/ GH joint in plane of scapula

**Hawkins:**
- Shoulder in 90° of forward flexion w/ elbow in 90° flexion & forcibly internally rotating the shoulder

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**Signs/Special Tests**

- **Joint stability**
  - **Load & shift:** pt supine, 90° abduction/90° external rotation position, apply anterior & posterior force to humeral head; for anterior/posterior laxity
  - **Sulcus sign:** seated w/ downward traction on elbow; +/- ≥2cm displacement; inferior laxity
  - **Apprehension test:** seated, 90/90 position w/ anterior pressure on humerus; +/- ‘apprehension’ that it’s going to dislocate
  - **Relocation test:** supine, 90/90, have pt ‘throw’ against your hand; +/- less pain/apprehension when examiner is applying posterior force to humeral head

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**Signs/Special Tests**

- **Labral pathology**
  - Cross over test
  - O’Brien’s

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**Biceps pathology**

**Speed’s:** resisted forward flexion of shoulder with elbow extended and forearm supinated; +/- pain at bicipital groove

**Yergasons:** elbow flexed to 90° w/ forearm pronated; +/- pain in bicipital groove w/ resisted supination
Neck

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Palpation

- Spinous processes:
  - C2 is 1st palpable process
  - C7 is larger than those above them
- Muscles:
  - Sternocleidomastoid
  - Trapezius
- Lymph nodes

ROM

- Flexion: 60°
- Extension: 70°
- Lateral flexion: 20-45°
- Rotation: 90°

Strength & Neuro Exam
Special Tests

• Spurling’s maneuver
  – Extend & rotate the neck to side of the pain and apply axial load on head
  – + test= limb pain or parathesias produced
  – Specific, not sensitive

• Adson’s
  – Loss of the radial pulse when the arm is abducted, extended backward, the head is turned ipsilaterally, and the patient inspires (UpToDate)
  – + test = loss of radial pulse
  – Common in Thoracic Outlet Syndrome

• Roo’s
  – Repetitive and vigorous hand grip while the arms are abducted overhead for 3 min (UpToDate)
  – + = paresthesias, inability to complete
  – Common in Thoracic Outlet Syndrome

References

• UpToDate