

Faculty Assessor Form - SHOULDER History and Examination Skills
University of Wisconsin Department of Family Medicine, Copyright 2006

Resident: _____

Date: _____

Faculty Assessor: _____

Pre-teaching OR Post-teaching

Location: Baraboo Eau Claire Fox Valley Madison Milwaukee Wausau Other _____

Faculty Assessor: Please complete this form while you observe the resident performing a shoulder exam on a patient (real or standardized) with shoulder pain. Instruct the resident ahead of time, "Please take a history and perform a complete shoulder exam on this patient. Please describe what you are doing during the exam." If using a standardized patient, please also tell the resident, "The patient will not respond to your questions."

Part 1: History – Did the learner ask about:

	<u>Points (Yes = 1 No = 0)</u>	
1. when symptoms started?	Yes <input type="radio"/>	No <input type="radio"/>
2. history of trauma/injury?	Yes <input type="radio"/>	No <input type="radio"/>
3. mechanism of injury?	Yes <input type="radio"/>	No <input type="radio"/>
4. location of the pain?	Yes <input type="radio"/>	No <input type="radio"/>
5. radiation of pain?	Yes <input type="radio"/>	No <input type="radio"/>
6. sources of referred pain? (spine/neck, cardiac, gallbladder – at least one)	Yes <input type="radio"/>	No <input type="radio"/>
7. painful arc? (pain between 60-120° abduction)	Yes <input type="radio"/>	No <input type="radio"/>
8. night pain? (while lying on painful side)	Yes <input type="radio"/>	No <input type="radio"/>
9. history of instability/dislocation?	Yes <input type="radio"/>	No <input type="radio"/>
10. aggravating factors?	Yes <input type="radio"/>	No <input type="radio"/>
11. relieving factors/treatments tried?	Yes <input type="radio"/>	No <input type="radio"/>
12. history of previous shoulder problems or surgery?	Yes <input type="radio"/>	No <input type="radio"/>

Total History points: _____ (12 possible)

Part 2: Physical Exam – Did the learner CORRECTLY perform the following physical exam skills?

	<u>Points (Yes = 1 No = 0)</u>	
13. compare affected shoulder to unaffected shoulder?	Yes <input type="radio"/>	No <input type="radio"/>
14. evaluate for warmth and erythema?	Yes <input type="radio"/>	No <input type="radio"/>
15. inspect the shoulders for atrophy, asymmetry?	Yes <input type="radio"/>	No <input type="radio"/>
16. palpate the following structures (must indent the skin)?		
a. sternoclavicular (SC) joint	Yes <input type="radio"/>	No <input type="radio"/>
b. clavicle	Yes <input type="radio"/>	No <input type="radio"/>
c. acromioclavicular (AC) joint	Yes <input type="radio"/>	No <input type="radio"/>
d. subacromial bursa	Yes <input type="radio"/>	No <input type="radio"/>
e. bicipital groove	Yes <input type="radio"/>	No <input type="radio"/>
f. lesser tuberosity	Yes <input type="radio"/>	No <input type="radio"/>
g. greater tuberosity	Yes <input type="radio"/>	No <input type="radio"/>
h. scapula (spinatus muscles)	Yes <input type="radio"/>	No <input type="radio"/>
17. evaluate range of motion?		
a. flexion (180°)	Yes <input type="radio"/>	No <input type="radio"/>
b. extension (40°)	Yes <input type="radio"/>	No <input type="radio"/>
c. abduction (180°, palms up)	Yes <input type="radio"/>	No <input type="radio"/>

Resident name: _____

Date: _____

- d. adduction (0°, arms at side) Yes No
- e. external rotation (45° when arm at side OR Apley's scratch test) Yes No
- f. internal rotation (55° when arm at side OR Apley's scratch test) Yes No

18. assess strength?

- a. flexion (elbow flexed at side) Yes No
- b. extension (elbow flexed at side) Yes No
- c. external rotation (elbow flexed at side) Yes No
- d. internal rotation (elbow flexed at side) Yes No
- e. empty can test (supraspinatus) Yes No
- f. lift-off test (subscapularis) Yes No

19. perform special tests?

- a. Drop-arm test (supraspinatus integrity) Yes No
- b. Impingement tests
 - i. Neer's sign Yes No
 - ii. Hawkin's test Yes No
- c. Speed's test (biceps tendon) Yes No
- d. Labral tear
 - i. O'Brien's active compression test Yes No
 - ii. Crank test Yes No
- e. Instability tests
 - i. Apprehension test Yes No
 - ii. Relocation test Yes No
 - iii. Anterior release test Yes No

Total Physical Exam points: _____ (32 possible)

TOTAL History + PE: _____ (44 possible)



Empty can test



Lift-off test



Neer's sign



Hawkin's test



O'Brien's test



Crank test