

Office Orthopedics for the Primary Care Physician

Knee and Shoulder

- A. Shoulder
 - a. Stiffness
 - b. Weakness
 - c. Stability
 - d. Smoothness
- B. Knee
 - a. Swelling
 - b. Stability
 - c. Locking
 - d. Patellofemoral
- C. Shoulder – History and Physical Exam
 - a. Don't miss the big stuff!!
 - i. Tumor
 - 1. Night pain, Metastatic disease, Atypical pain
 - ii. Infection
 - 1. Fevers, Chills, Range of Motion
 - b. Stiffness – Adhesive Capsulitis
 - i. History
 - 1. Diabetic
 - 2. Cardiac cripple
 - 3. Middle aged female
 - ii. Physical Exam - Range of Motion
 - 1. Forward Elevation
 - 2. External Rotation
 - 3. Internal Rotation
 - iii. Studies
 - 1. Radiographs
 - a. AP, outlet, axillary lateral, AC joint
 - iv. Treatment
 - 1. PT, PT, PT
 - 2. Manipulation Under Anesthesia
 - 3. Arthroscopy
 - c. Weakness – Rotator Cuff Tear
 - i. History
 - 1. Age > 50
 - 2. Injury
 - 3. Dislocation >35 – 1st time
 - ii. Physical Exam – Strength

1. External rotation
2. Resisted Deltoid
3. O'Briens Test
- iii. Studies
 1. MRI
 2. Ultrasound
- iv. Treatment
 1. PT
 2. Injections?
 3. Open Vs Arthroscopic Repair
- d. Stability
 - i. History
 1. Age
 - a. Male 15-25
 - b. Female – teens
 2. Mechanism
 - a. Traumatic - Unilateral
 - b. Atraumatic - Bilateral
 - ii. Physical Exam
 1. Apprehension / Relocation test
 2. Load and Shift
 - iii. Studies
 1. Radiographs
 2. MRI with Gad
 - iv. Treatment
 1. Traumatic
 - a. Rehab vs Stabilization
 2. Atraumatic
 - a. Rehab, Rehab, Rehab
 - b. Stabilization
 - v. TUBS
 - vi. AMBRI
- e. Smoothness
 - i. History
 1. Age
 2. Duration
 3. Stiffness
 - ii. Physical Exam
 1. Stiffness
 2. Crepitance
 - iii. Studies
 1. Radiographs
 - iv. Treatment
 1. PT
 2. Injections
 3. Joint Replacement

- f. Impingement
- g. Biceps Tendinitis
- D. Knee – History and Physical Exam
 - a. Don't miss the big stuff!!
 - i. Tumor
 - 1. Night pain, Metastatic disease, Atypical pain
 - ii. Infection
 - 1. Fevers, Chills, Range of Motion
 - iii. Fractures
 - 1. Always get radiographs
 - b. History
 - i. Age
 - 1. <50 – ligaments, meniscus, patellofemoral
 - 2. >50 – meniscus, osteoarthritis, patellofemoral
 - ii. Mechanism
 - 1. Traumatic
 - a. Pop, Drop, Can't walk, Swelling immediately
 - b. Sore, Walk, Later Swell
 - 2. Atraumatic
 - a. Multiple injuries
 - b. Insidious onset
 - 3. "True" Locking
 - 4. Stair and Hill pain
 - 5. Location of the pain
 - a. Anterior vs posterior vs medial vs lateral
 - 6. Other injuries
 - a. Ankle sprain
 - c. Physical Exam – Look at the other side!!
 - i. Effusion / Swelling
 - 1. Extension, Relax, "Milk" the pouch
 - 2. Think mechanical
 - a. Meniscus, Ligaments, Osteoarthritis
 - 3. Remember inflammatory
 - a. Gout, pseudogout
 - ii. Stability
 - 1. Anterior Cruciate Ligament
 - a. Lachman
 - b. Pivot shift
 - c. ?Drawer
 - 2. Posterior Cruciate Ligament
 - a. Sag / Drawer
 - b. Quadriceps active test
 - 3. Medial Collateral Ligament
 - a. Valgus stress at 0 and 20 degrees
 - b. Tenderness – medial epicondyle
 - 4. Lateral Collateral Ligament

- a. Varus stress at 0 and 20 degrees
 - b. Tenderness – hip external rotation and abduction
 - c. Dial test
 - i. 0 , 30, and 90 degrees
 - iii. Location of the pain – tendonitis
 - 1. Inferior / superior pole of the patella
 - 2. medial retinaculum
 - 3. Iliotibial band
 - 4. Pes anserine
- d. Studies
 - i. Radiographs
 - 1. Standing AP and PA, sunrise, lateral
 - ii. MRI
- e. Treatment
 - i. Nonoperative
 - 1. Medications
 - a. NSAIDS
 - b. Glucosamine / Chondroitin
 - 2. Braces
 - a. Ligaments
 - b. Patellofemoral
 - 3. Physical Therapy
 - a. Stretching
 - b. Strengthening
 - c. Taping
 - d. Modalities
 - i. Ultrasound, Stimulation
 - 4. Modify activities
 - a. Swimming, biking
 - 5. Works well for patellofemoral, tendinopathies, mild osteoarthritis, MCL and PCL tears (isolated), ?small meniscus tears
 - ii. Operative
 - 1. Arthroscopy
 - a. Works well for meniscus pathology, loose bodies, small chondral flaps
 - b. Questionable efficacy for advanced osteoarthritis, patellofemoral pathology, plica
 - 2. Reconstruction - Ligament
 - a. ACL, PCL, LCL, and combined instabilities
 - b. Patellar instability
 - 3. Reconstruction – Advanced cartilage pathology
 - a. Osteotomies
 - b. Arthroplasty

E. Don't miss the big stuff!!

