

SHOULDER ACUTE INJURIES

IDENTIFICATION AND TREATMENT

Acromioclavicular Sprains

"Separated Shoulder"

- Fall on point of shoulder
- Fall on elbow
- Fall on outstretched arm

Grade I

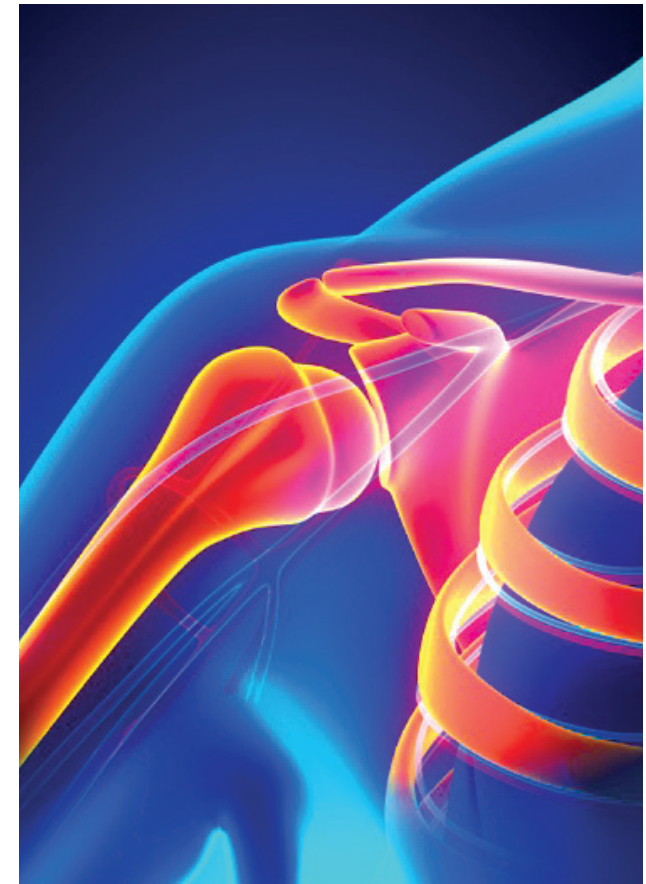
- Sprain of acromioclavicular ligament
- Coracoclavicular ligament intact
- Minimal tenderness over AC
- Minimal swelling over AC
- Clavicle stable

Grade II

- Severe pain
- Acromioclavicular ligament partial sprain
- Coracoclavicular ligament sprain
- Increased tenderness and swelling over the acromioclavicular
- Significant range of motion loss
- Noted clavicle elevation

Grade III

- Severe pain
- Complete tear of acromioclavicular and coracoclavicular ligaments
- Athlete supports arm
- Significant tenderness and swelling
- Deformity with clavicle elevation
- Significant range of motion loss



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Dislocation

- Arm taken into abduction and external rotation — the force pushes the arm beyond the limits of the capsule and the ligaments surrounding the glenohumeral joint
- Head of the humerus is driven anteriorly against joint capsule, stretching subscapularis tendon
- Usually dislocates in an anterior/inferior direction
- Feels anterior/posterior pain that subsides
- Athlete carries shoulder with care
- Possible localized swelling if first dislocation
- Will require physician evaluation and care

Subluxation

**Partial dislocation, or dislocation that spontaneously reduces*

- Feels joint clunk as it slides in and out
- Will require physician evaluation and care