

05



McLaren Thumb Region

1100 S. Van Dyke
THUMB REGION Bad Axe, MI 48413 • 989-269-9521

EMERGENCY PHYSICIAN RECORD
Shoulder Injury / Pain

DATE: _____ TIME SEEN: _____ on arrival RM: _____ EMS Arrival

HISTORIAN: patient spouse paramedics _____

___ HX / ___ EXAM LIMITED BY: _____
 unable to obtain

HPI

chief complaint: injury / pain to: R / L shoulder arm neck

onset / duration:
just prior to arrival
today / yesterday _____
_____ min / hrs / days ago

where:
home school neighbor's
park work street

severity of pain:
mild moderate severe
(1/10)

worse / persistent since
pain intermittent / lasting

context: fall direct blow dislocated while raising R / L arm

associated symptoms:
weakness (R/L) _____ tingling / numbness (R/L) _____
bruising (R/L) _____ abdominal pain / injury: _____
unable to move shoulder (R/L) _____ generalized RUQ LUQ RLQ LLQ _____

ROS

CONST - recent illness / fever _____ NEURO - headache _____
CVS - chest pain _____ GI - nausea / vomiting _____
RESP - shortness of breath / cough _____ LYMPH - ankle swelling (R/L) _____
MS - neck / back pain _____ SKIN - rash _____
GU - problems urinating _____ PSYCH - anxiety / depression _____
LNMP _____ preg post-menop _____

except as marked positive, all systems above reviewed and found negative

• NEURO / HEME / MS components also addressed in HPI

PAST HX ___no chronic diseases R / L HANDED
cardiac disease Afib CAD CHF MI asthma / COPD
diabetes Type 1 Type 2 _____ hepatitis / HIV
diet / oral / insulin _____ prior injury / dislocation
hypertension _____
___old records reviewed / summary: _____

Surgeries / Procedures- ___none
Tetanus immun. UTD / given in ED
Meds- ___none / see nurses note aspirin within 24 hrs
Allergies- ___NKDA / see nurses note

SOCIAL HX smoker ___ppd / never / past / quit: _____ ago
tobacco: use / dependence _____ nicotine: use / dependence _____
drugs _____ alcohol (recent / heavy / occasional) screening _____

FAMILY HX cardiac disease _____

Nursing Assessment Reviewed Vitals Reviewed
V/S BP _____ HR _____ RR _____ Temp _____

PHYSICAL EXAM

General Appearance

___no acute distress ___c-collar / backboard (PTA / in ED)
___alert ___mild / moderate / severe distress
___anxious

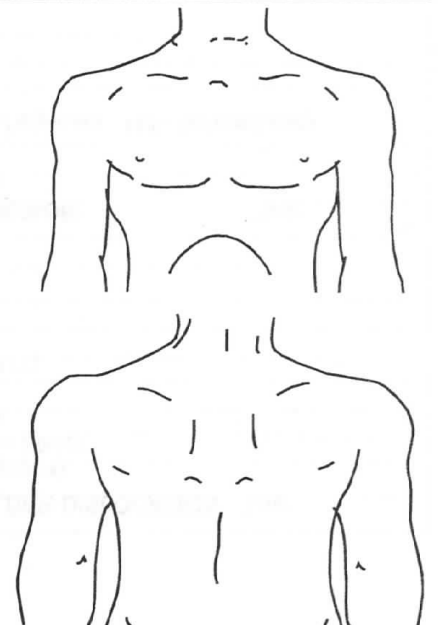
SHOULDER

___nml inspection ___see diagram
___full ROM ___tenderness soft-tissue / bony (R/L)
___no dislocation ___swelling / ecchymosis (R/L)
___deformity (R/L)
clavicular deformity AC drop-off
anterior fullness
___limited ROM (R/L)
held in: ___adduction ___abduction
___internal rotation ___external rotation
limited: ___adduction ___abduction
___internal rotation ___external rotation
___flexion ___extension

UPPER EXTREM.

___uninjured below shoulder ___see diagram
___tenderness soft-tissue / bony (R/L)
___swelling (R/L)
___limited elbow ROM (R/L)

- A=Abrasion
B=Burn
C=Contusion
E=Ecchymosis
FB= Foreign Body
L=Laceration
M=Muscle Spasm
Pt=Point
T=Tenderness
PW=Puncture Wound
S=Swelling
T=Tenderness
Ø= without
m=mild
mod=moderate
sv=severe



(n=nondisplaced d=displaced)

Dislocation:
 R/L Shoulder: anterior posterior inferior
 R/L AC joint: post inf displaced: 100% - 200% > 200%
 R/L SC joint: anterior posterior: mild moderate severe
 R/L Elbow: ant post med lat radial head: ant post med lat

Fracture:
 Clavicle: proximal shaft distal: nondisplaced displaced: ant post
 Scapula: glenoid neck acromion coracoid process body
 Humerus: proximal: articular head surgical neck: 2 parts 3 4
 greater tuberosity lesser tuberosity
 shaft: transverse oblique spiral segmental comminuted
 distal: supracondylar: simple comminuted
 condyle: medial lat intercondylar transcondylar
 epicondyle: medial lateral
 n / d

Interpretation: By me Viewed by me Discd w/ radiologist
 nml / NAD no fracture nml alignment no FB
 abnml: fracture / dislocation (see below) STS effusion fat pad sign
 DJD FB

Xrays done:
 R shoulder AC joint scapula clavicle humerus elbow
 L shoulder AC joint scapula clavicle humerus elbow

XRAYS

OTHER
 sling / shoulder immobilizer / clavicle strap

RECHECK POST-REDUCTION: Time: _____
 exam: neuro / vasc intact

REDUCTION OF SHOULDER DISLOCATION Time: _____
 procedural sedation (see page 4)
 traction / counter traction (R/L)
 Kocher maneuver (R/L)
 weights (_____ lbs)
 scapular manipulation (R/L)
 other _____

PROCEDURES

Time _____
 unchanged improved re-examined

PROGRESS

HEAD / ENT
 nml inspection pharynx nml
 tenderness / swelling: R / L ear
 ecchymosis

NECK / BACK
 nml inspection
 non-tender
 painless ROM
 tenderness / swelling
 vertebral point-tenderness
 ecchymosis

RESPIRATORY
 chest non-tender
 no resp. distress
 breath sound nml
 crepitus / subcutaneous emphysema
 wheezes / rales / rhonchi (R/L)

CVS
 heart sounds nml
 tachycardia / bradycardia
 reg. rate & rhythm
 irregularly irregular rate

ABDOMEN / GU
 non-tender
 no organomegaly
 tenderness / guarding: _____
 generalized RUQ LUQ RLQ LLQ
 catheter present

SKIN

_____ intact
 warm, dry
 see diagram
 diaphoretic / cool / cyanotic
 pressure ulcer: location _____
 depth / stage: 1 2 3 4

VASCULAR

_____ no vascular compromise
 abnml color / warmth / cap refill (R/L)
 brachial pulse deficit (R/L)
 radial pulse deficit (R/L)

NEURO

_____ sensation nml
 _____ motor nml
 sensory / motor deficit (R/L)
 weak arm abduction (deltoid) (R/L)
 abnml reflexes

