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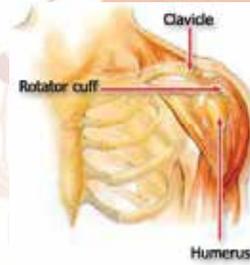
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Shoulder injury

The shoulder has several bones combined with cartilage, tendons, and muscles, allowing a wide range of motion in the arm. The shoulder moves in more directions than any other joint. From scratching your back to throwing a baseball, the shoulder is used every day in a variety of ways.

The shoulder is made up of three bones: the upper arm bone (**humerus**), the shoulder blade (**scapula**), and the collarbone (**clavicle**). These three bones provide mobility to use your arms and shoulders in many ways. Impairment of the shoulder may cause instability of the soft tissue and bony structures, resulting in pain when you move your shoulder. The pain may be temporary, or it may be a persistent nagging pain that requires a medical diagnosis, treatment, or as a last resort, surgery. In this newsletter issue, we will 1) identify common shoulder injuries, 2) explain causes of shoulder pain, and 3) explain treatment options.



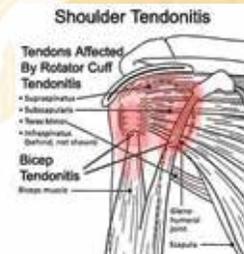
Common shoulder injuries

The shoulder is supported by bones, muscles, tendons, and ligaments. An injury to any of these areas can lead to instability of the shoulder. Some common types of shoulder injury are:



Rotator cuff tear: Traumatic injury or overuse of the muscle surrounding or supporting the shoulder can cause the tendon of the shoulder joint to tear. This is usually painful. A person with this condition cannot lift their arm over their head.

Tendonitis: An inflammatory condition when the shoulder is overused by overhead movements. This is most common in athletes.



Fracture of the clavicle: Also known as the collarbone, the clavicle provides shoulder stability and connects the shoulder joint with the chest. When this bone is broken, the patient's thoracic outlet may become compressed. Nerves and blood vessels enter the arm through the thoracic outlet. This condition is painful in the affected shoulder and arm.

Frozen shoulder: The medical term for frozen shoulder is **adhesive capsulitis**, which usually occurs on one specific side and can spread to the other shoulder as well. This condition is due to a thickening and tightening of the joint capsule. This can be caused by immobilization for an extended period, such as during a surgical recovery period. For instance, someone who has had rotator cuff surgery that requires a recovery period of shoulder immobility can develop adhesive capsulitis.



Impingement: Impingement of the shoulder joint occurs when the rotator cuff and the acromion bone (bony process on the scapula) becomes narrowed, preventing the tendons from moving freely. This condition can be diagnosed with tests that move the arm into particular positions that elicit pain.

(continued on back page)

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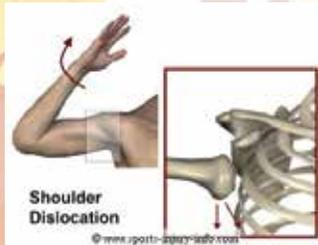
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Shoulder injury *(continued from front page)*



Dislocated shoulder: This injury occurs due to a serious traumatic event, such as blunt-force trauma. In older patients a dislocated shoulder often results from a fall from a standing height. In younger patients their fractures are more likely caused by a high-energy impact from a motor vehicle accident or contact sport. The injury occurs to the head of the upper arm bone that is forced forward when the arm is turned outward or overstretches the muscles and tendons, resulting in the loosening of the arm bone from the shoulder's ball and socket.

Slap tear: Trauma can split and tear tendons, resulting in an acute injury. Degenerative changes in the tendons due to advancing age and long-term wear and tear can also cause tendon injury. Tears of the tendon may be partial or complete. In most cases of complete tears, the tendon is pulled away from its attachment to the bone.



Traction injury: Traction injuries occur when nerves between the neck and shoulder are overstretched. This injury is common with motorcycle riders and athletes, and occurs when the shoulder joint area is extended by force beyond its normal range. The resulting injury causes pain and numbness in the affected area. There is no treatment for this injury except therapy and pain management.



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What to do

If you sustain a shoulder injury, the first step is to seek medical care as soon as possible. An early diagnosis and record of treatment are important. If pain is minor, rest the injured shoulder for a few days to see if the pain will resolve. If symptoms persist, see a physician who can conduct a comprehensive examination to determine the cause of your shoulder pain. The treating physician will look for physical abnormalities, swelling, deformity, tenderness, and muscle weakness. The physician will also test the shoulder's range of motion and strength. Physicians also rely on medical history by asking questions concerning when you first experienced shoulder pain. Tests such as X-rays, MRIs, CT scans, and other tests can be ordered to help identify the cause of shoulder pain and any other problems.

Treatment

Once the condition has been diagnosed, treatment for the injury can be accessed. There are several options available for treating a shoulder injury:

Physical therapy: This treatment improves strength and flexibility so patients can return to preinjury levels of activity.

Medications: Physicians prescribe nonsteroidal anti-inflammatory pain medications, commonly referred to as **NSAIDs**, which reduce inflammation and pain. Opioids are commonly prescribed for pain management. Nerve medication such as gabapentin can help moderate nerve-damage pain.

Injections: Cortisone is a powerful medication that treats inflammation, a common problem with shoulder injuries.

Surgery: Ninety percent of patients with shoulder pain will respond to conservative treatments. However, certain types of shoulder problems, such as recurring dislocations, and rotator cuff or slap tears, may not benefit from less evasive methods. In these cases surgery may be necessary. Surgery involves arthroscopy to remove scar tissue or repair torn tissue, or, on a larger scale, reconstruction or shoulder replacement surgery.

A shoulder injury can result in a permanent impairment. Permanent impairments are quantified after a patient has reached a plateau of improvement after all treatments to improve the condition have been exhausted. These treatments may involve surgery and physical therapy. A serious shoulder injury may require future medical care, including pain management and a change in occupation.