

Cause	Direct shoulder trauma or fall onto out-stretched arm resulting in shoulder dislocation -subluxation				
Symptoms	<ul style="list-style-type: none"> - Immediate - pain + inability to move arm - Formal manual reduction with sedation (possibly) - Late symptoms of instability, apprehension, popping, pain, unable to 'trust' the shoulder 				
Signs	<ul style="list-style-type: none"> - Apprehension test with shoulder abducted and externally rotated - Decreased apprehension - relocation maneuver - Rotator cuff tears and brachial plexus injuries can be associated in older individuals 				
Natural History	<ul style="list-style-type: none"> - High demand/younger individuals (manual workers/athletes) have higher risk of recurrence - Lower demand / older individuals have a lower risk of recurrent instability, but may have symptoms of rotator cuff pathology 				
Imaging	Plain X-rays, MRI				
Non-operative Treatment	<ul style="list-style-type: none"> - Sling immobilization (2 weeks-younger, 1 week-older) - Physical therapy - cuff strengthening, scapular stabilization 				
Operative Treatment	<ul style="list-style-type: none"> - Arthroscopic Bankart repair +/- capsular plication - Large bony Bankart defects require Latarjet procedure 				
MMI (Maximum Medical Improvement)	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Non-operative</td> <td style="width: 50%;">10-12 weeks</td> </tr> <tr> <td>Operative</td> <td>12-24 weeks</td> </tr> </table>	Non-operative	10-12 weeks	Operative	12-24 weeks
Non-operative	10-12 weeks				
Operative	12-24 weeks				
Work Status Until MMI	No overhead activity, no lifting more than 11lb weights, no pushing / pulling, no collision sports				
Questions	srinath.kamineni@uky.edu				
Patient Scheduling	+1 (859) 323 5533				