Shoulder instability management

Hello,

Thank you!

Thank you for participating in the Shoulder Instability PRISM Research Interest Group survey looking at shoulder instability management. If you have any questions please reach out to Shital.Parikh@cchmc.org or Matthew.Veerkamp@cchmc.org.

1. How many years have you been in practice?		< 5 years of experience 6-10 years of experience 11-15 years of experience >15 years of experience Academic Private Practice Mix of Academic and Private Practice Military	
2. What type of practice are you involved in?			
3. Fellowship training?		Sports MedicinePediatricsBothOther, specify	
Specify other fellowship expertise			
4. Where do you practice?		○ West coast (US)○ East coast (US)○ Midwest (US)○ South (US)○ Other, specify	
Specify other practice location			
5. How many shoulder instability cases do you perform annually (open or arthroscopic)?		<pre> < 25</pre>	
6. Select the factors that would i	nfluence your tre	eatment decision for first	time shoulder
dislocation treatment.	Yes		No
Age	O		\bigcirc
Sex			\circ
Status of physis	\circ		\circ
Bony Bankart	\circ		\circ
Mechanism of injury (contact vs non-contact)	0		0

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Primary Sport (of position) Oplayed?	
6.1 What chronological age would be your cuttoff for non-operative vs operative treatment for boys?	 13 years or less 14 years or less 15 years or less 16 years or less other
Other age cutoff for boys	
6.2 What chronolgical age would be your cuttoff for non-operative vs operative treatment for girls?	 12 years or less 13 years or less 14 years or less 15 years or less Other (age in years)
Other age cutoff for girls	
Case 1: 18 yr old male was tackled playing football (co dislocation that required reduction in the ED. I shoulder. The patient presents to your office 8 ligamentous laxity on exam (Beighton 0/9). Ap test negative. Strength 5/5.	days from initial injury. No evidence of
7. What advanced imaging would you prefer for this patient in your practice? (select all that apply)	 MRI 1.5T MRI 3T MR arthrogram CT I routinely do not get advanced imaging for first time dislocation
8. MRI shows Bankart tear (anterior-inferior labral tear). There is no bone loss. How would you treat this patient?	Arthroscopic surgeryNon-operativelyOpen surgery
tear). There is no bone loss. How would you treat this	Non-operatively



Case 2:				
18 yr old female sustained a first-time anterior shoulder dislocation when she fell on an outstretched hand while roller skating. The dislocation had to be reduced. Beighton index 0/9. Apprehension and relocation test are positive. MRI shows Bankart tear (anterior-inferior labral tear). There is no bone loss.				
11. How would you treat this patient?	Arthroscopic surgeryNon-operativelyOpen surgery			
12. Same as Case 2, but the patient is an 11 year old female with open proximal humerus physis. How would you treat this patient?	Arthroscopic surgeryNon-operativelyOpen surgery			
13. Same as Case 2, but the patient is a 14 year old girl with closing proximal humerus growth plate. How would you treat this patient?	Arthroscopic surgeryNon-operativelyOpen surgery			
15 yr old boy with closing proximal humerus phy dislocation after a fall on an outstretched hand a (non-contact injury). He sustained a Bankart tea 14. How would you treat this patient?	as he came down from basketball jump			
Case 4: A 14 yr old boy with open proximal humerus phy dislocation following wrestling injury. MRI shows				
15. Does this patient routinely get a CT scan in your practice irrespective of what the MRI shows?				
16. How would you treat this patient?	Arthroscopic surgeryNon-operativelyOpen surgery			
17. Same as Case 4, but the patient is an 18 year old boy with closed proximal humerus growth plate. How would you treat this patient?	Arthroscopic surgeryNon-operativelyOpen surgery			



Case 5:				
A 12 year old girl, an overhead athlete, with open p	roximal humerus physis, has pain and			
instability symptoms related to her dominant shoul	der while playing volleyball. No known			
shoulder dislocation. She remains symptomatic after	er 6 months of conservative treatment,			
including PT. Beighton is 7/9. She is diagnosed with	multi-directional instability (MDI).			
18. Does this patient get an MRI or MR arthrogram in your practice?	○ Yes○ No			
19. How would you treat this patient if the MRI is normal?	Arthroscopic surgeryNon-operativelyOpen surgery			
20. This patient now sustains an anterior dislocation which had to be reduced. The MRI is normal. How would you treat the patient?	Arthroscopic surgeryNon-operativelyOpen surgery			
21. This patient now has recurrent anterior dislocations. MRI shows anterior labral tear. How would you treat the patient?	Arthroscopic surgeryNon-operativelyOpen surgery			
Case 6:				
A 16 yr old female, with closed physis, has been diagnosed with Multi-directional Instability (MDI). She has failed 6 months of conservative treatment.				
22. How would you treat this patient?	Arthroscopic surgeryNon-operativelyOpen surgery			
23. Same as in Case 6, but the girl is 13 years old and has closing proximal humerus physis and MDI. How would you treat this patient?	Arthroscopic surgeryNon-operativelyOpen surgery			
24. What is your surgery preference when treating MDI in any patient in primary setting?	 Open capsular shift Arthroscopic capsular plication with sutures Arthroscopic capsule-labral plication with suture anchors 			

○ Yes○ No



25. Is there a role of rotator interval closure during operative treatment of shoulder instability?