

Shoulder Dislocation Survey

Before we begin, we would like to learn a little more about you.

What is your age?

What is your gender?

- ☐ Male
- ☐ Female

What is your marital status?

- ☐ Single
- ☐ Married
- ☐ Divorced
- ☐ Widowed
- ☐ Other

Please specify other.

What is your student status?

- ☐ Full time student
- ☐ Part time student
- ☐ Not a student

What is your employment status?

- ☐ Employed full time (30+ hours/week)
- ☐ Employed part time (< 30 hours/week)
- ☐ Not employed

Have you previously dislocated your shoulder?

- ☐ Yes
☐ No

Sports activities

Check any of the activities you have participated in during the last 12 months.

- ☐ Aerobics ☐ Baseball ☐ Basketball ☐ Boxing ☐ Cross-training ☐ Cycling ☐ Dancing
☐ Diving ☐ Field hockey ☐ Football ☐ Golf ☐ Gymnastics ☐ Horseback riding
☐ Ice hockey ☐ Lacrosse ☐ Martial arts ☐ Racquetball/Squash ☐ Rowing ☐ Running
☐ Rugby ☐ Soccer ☐ Skiing ☐ Tennis ☐ Swimming ☐ Wrestling ☐ Weightlifting
☐ Volleyball ☐ Yoga

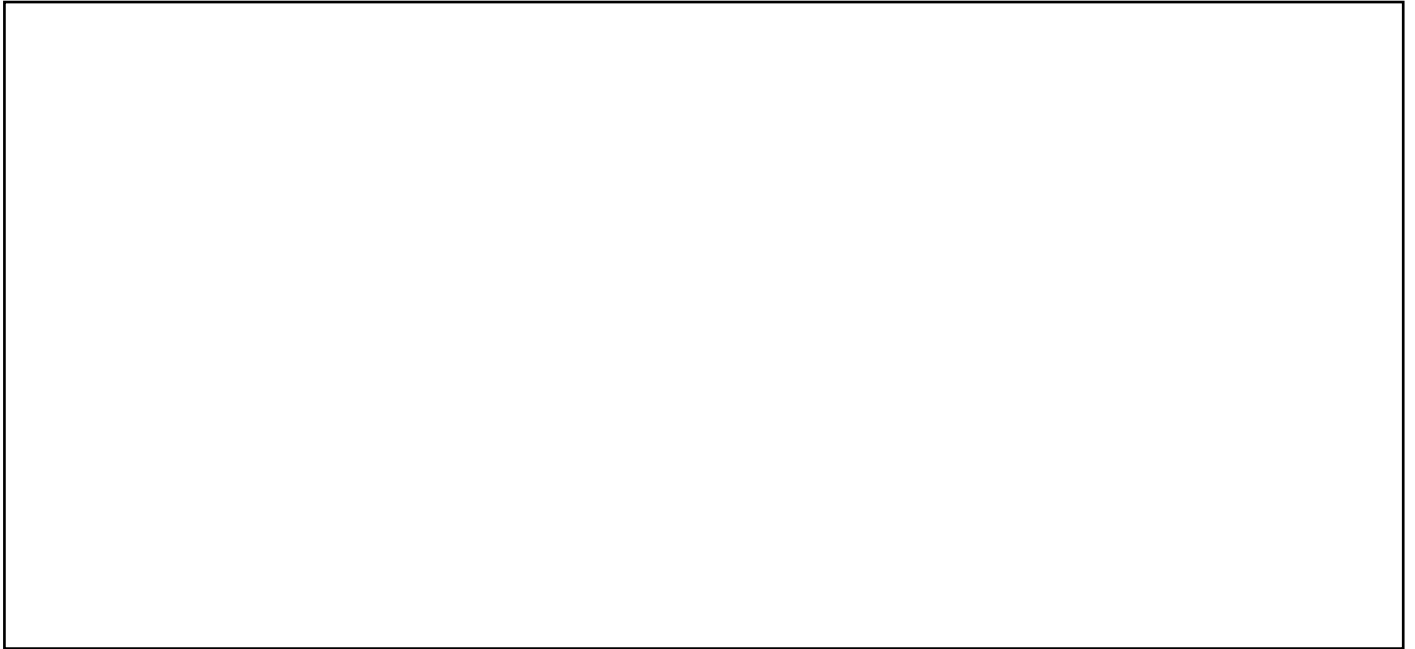
Please specify any other activities:

Please indicate how many times you have participated in each activity in the past year.

	Less than once per month	About once per month	About once per week	More than once per week
Aerobics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Baseball	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Basketball	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Boxing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cross-training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dancing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diving	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Field hockey	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Less than once per month	About once per month	About once per week	More than once per week
Football	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Golf	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gymnastics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Horseback riding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ice hockey	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lacrosse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Martial arts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Racquetball/Squash	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rowing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Running	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Less than once per month	About once per month	About once per week	More than once per week
Rugby	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Soccer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skiing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tennis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Swimming	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wrestling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Weightlifting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Volleyball	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Yoga	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Video

In order to learn a little more about shoulder dislocations, please watch the video below before proceeding with the survey.



Scenario

As you go through the upcoming survey, try to put yourself in the following scenario:

You are walking past a field where a group of students is playing a spirited game of Frisbee when a long pass is thrown in your direction. You sprint forward to catch the Frisbee before it flies into the road. As you sprint forward, you trip and land on the ground in an awkward position with your arm outstretched. You hear a pop in your shoulder and immediately feel an intense pain.

Getting up, you realize you are unable to move your arm and the intense pain is not improving. Your friends notice your shoulder appears out of place, and they drive you to a nearby hospital. After waiting in the emergency room, the resident on duty evaluates you, administers anesthesia to lessen the pain, and maneuvers your arm to successfully pop your shoulder back into place.

You are sent home with a sling and pain medication and told to follow up with your doctor in a week to discuss further treatment. The information provided in the next few pages is the information you receive from your doctor. Based on this information, you must make a decision on the type of treatment you would like to receive for your shoulder dislocation.

Shoulder Dislocation Information

What happens after my shoulder is put back in place?

Your pain is significantly reduced after the humeral head is put back into the socket. You will be given a sling for comfort while your body recovers from the trauma of the dislocation. In the following weeks, you may choose to pursue various treatment options.

In the first year or two following a first-time shoulder dislocation and a return to normal activity, you are more likely to experience a second shoulder dislocation. This condition is known as a recurrent shoulder dislocation. The risk of this recurrent injury has undergone extensive investigation and depends on multiple factors, including the severity of your shoulder injury, age, gender and participation in overhead or contact sports. Examples of overhead sports include tennis and swimming, while contact sports include football, hockey, lacrosse and basketball.

Recurrent shoulder dislocations can become more frequent as you experience them. They can lead to shoulder instability, a condition that causes pain and limits shoulder strength and range of motion. There also appears to be an association between recurrent shoulder dislocation and arthritis 10-20 years after the first time dislocation. However, this link is neither completely understood nor proven at this point.

What is a shoulder dislocation?

A shoulder dislocation is an injury that involves a ball-and-socket joint. The ball refers to the rounded top of the bone in the upper arm (humerus), which fits into the socket, the cup-shaped outer part of the shoulder blade. A shoulder dislocation occurs when the top of the humerus moves out of its usual location in the shoulder joint. A similar injury, known as a shoulder subluxation, can result when the humeral head is partially displaced from its usual location in the socket.

Shoulder dislocations are caused when lifting heavy items overhead, colliding or falling in sports, or experiencing accidents such as a motor vehicle collision. The most common type of shoulder dislocation-an anterior dislocation-occurs when the humeral head is displaced in front of and below the socket. These injuries are quite painful and usually require a visit to the emergency room to have the shoulder put back into place.

What are my treatment options for a shoulder dislocation?

You have two treatment options after a first time anterior shoulder dislocation: non-operative treatment or arthroscopic surgical repair.

Non-operative Treatment

Non-operative treatment involves rest in a sling and physical therapy to regain strength and full range of motion. Below are the details of what you can expect with this treatment option.

Pain

Immediately following the initial shoulder dislocation you may need a prescription medicine for pain that will make you sleepy and unable to go to school or work or to drive a car. By the end of the first week or sooner, you can take an over-the-counter medicine for the pain and go school or work and drive a car.

Physical limitations

You will wear the sling for comfort only and have no limit on moving the arm.

Physical therapy

You will have to go to physical therapy once or twice a week for 6 weeks and complete up to 30 minutes of exercises at home every day. The physical therapy will not be painful but you can have some mild discomfort.

Return to high-risk activities

One month after your dislocation you will have the option to fully return to contact sports and fully use your arm overhead.

Prognosis

Full range of shoulder motion returns in 6-8 weeks. Although most shoulder strength usually returns within 3 months, regaining full strength may take up to one year.

The risk of a repeat dislocation ranges from 15-90% and can be predicted by age and gender. For example, a teenage male athlete, who plays contact sports such as football, has a risk of recurrent dislocation as high as 90%. However, a woman in her mid-30s that does not participate in overhead or contact sports and does not frequently lift heavy objects over her head would have a risk of recurrent dislocation of about 15%.

With non-operative treatment you will risk the recurrent dislocation and instability discussed above. Non-operative treatment does not change the natural history of the injury. If you experience another dislocation you will likely have the same high level of pain and return to the emergency room to have the shoulder relocated. You will then need to use the sling and attend physical therapy as you did after the first dislocation.

Arthroscopic Surgical Repair

Arthroscopic surgical repair fixes the damaged parts of the shoulder using a camera and small instruments through several 1-centimeter incisions. Complications are rare and happen in fewer than 1 in 100 operations. These complications include shoulder stiffness, nerve damage, infection and bleeding.

Pain

In the first few days after the surgical repair, you will have to take a prescription medicine for pain that will make you sleepy and unable to go to school or work or to drive a car. By the end of the first week, you can take an over-the-counter medicine for the pain and go school or work and drive a car.

Physical limitations

For one month following surgical repair, you will have to wear a sling to keep your shoulder from moving. For another month after you are out of the sling, you will not be able to lift things heavier than 5 pounds above your head. At 6 months, you can again lift heavy things and play active sports.

Physical therapy

You will have to go to physical therapy once a week for 12 weeks and complete up to 30 minutes of exercises at home every day. The physical therapy will not be painful but you can have some mild discomfort.

Return to high-risk activities

At 6 months you will have the option to fully return to contact sports and fully use your arm overhead.

Prognosis

Surgery after first time anterior shoulder dislocation can reduce the risk of recurrent dislocation to 5% or lower. It is currently unknown if it can reduce the risk of developing arthritis in the future.

Shoulder Dislocation Survey

Based on the shoulder dislocation you experienced and the information you received at the hospital, please answer the following questions.

Which treatment option do you prefer?

- ☐ Arthroscopic Surgical Repair
- ☐ Non-operative Treatment
- ☐ Unsure

Thank you for your help. You're almost done, but we would like to know a little more about you before ending the survey.

Including you, how many people live in your household?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4 or more

What is your approximate household income?

- ☐ Less than \$20,000 per year
- ☐ Between \$20,000 and \$35,000 per year
- ☐ Between \$35,000 and \$50,000 per year
- ☐ Between \$50,000 and \$100,000 per year
- ☐ Over \$100,000 per year
- ☐ Prefer not to answer

What is the highest level of education you have completed?

- ☐ Grade school or some high school
- ☐ Graduated high school
- ☐ Attended some college
- ☐ Bachelor's degree
- ☐ Master's degree or other advanced degree
- ☐ Prefer not to answer

Do you currently have health insurance?

- ☐ Yes
- ☐ No
- ☐ Not sure, prefer not to answer

You indicated that you currently have health insurance. Most health insurance plans have certain levels of:

- Monthly or yearly premium costs
- Out-of-pocket costs for healthcare services
- A set deductible amount, above which insurance pays a certain percentage

Below are the descriptions of several common plans. Select the option that is most similar to your current plan.

- ☐ Lowest monthly premium, highest deductible. Insurance pays approximately 60% of all healthcare costs, while 40% of healthcare costs are paid out-of-pocket.
- ☐ Lower monthly premium, higher deductible. Insurance pays approximately 70% of all healthcare costs, while 30% of healthcare costs are paid out-of-pocket.
- ☐ Higher monthly premium, lower deductible. Insurance covers approximately 80% of healthcare costs, while 20% of healthcare costs are paid out-of-pocket.
- ☐ Highest monthly premium, lowest deductible. Insurance pays approximately 90% of all healthcare costs, while 10% of healthcare costs are paid out-of-pocket.
- ☐ Not sure, prefer not to answer

Who pays for the majority of your insurance premiums?

- ☐ I pay the majority of my costs
- ☐ My family or significant other pays the majority of my costs
- ☐ My company or school pays the majority of my costs
- ☐ The federal or state government pays the majority of my costs (ie, Medicare or Medicaid)
- ☐ Not sure, prefer not to answer