COMLEX Level 2 PE Exam

A 46 years old lady came to clinic as she has trouble raising her right arm above her head





Patient Data Sheet

- Patient Name: Ms. Smith
- Clinical Settings: Medicine Office
- **CC**: A 46 years old female presents with shoulder pain.

Vital Signs:

- Blood Pressure: 110/68 mm Hg
- Respirations: 12 per minute
- Temperature: 98 °F
- Pulse: 60 bpm, regular
- Height: 66 inches
- Weight: 136.4 lbs.
- **BMI**: 22 kg/m2

Differential Diagnoses

Orthopedic causes:

- Shoulder dislocation
- Fracture: clavicle/ Head of humerus
- Sprain of shoulder ligaments
- Bursitis/ rotator cuff tendonitis
- Rotator cuff tear
- Frozen shoulder
- Painful arc syndrome
- Calcific tendonitis
- Labral tear

Differential Diagnoses (Contd...)

Medical Causes:

- Polymyalgia rheumatica (PMR).
- Arthritis, usually secondary.
- RA, OA, Gout –very rarely affect the shoulder.

Key Points to Remember

- · Door information.
- Differential diagnoses.
- DO NOT: Repeat painful maneuvers.
- DO NOT: Shake hands with this patient or put your hand on her shoulder !!!!
- Consider medical causes only after orthopedic ones have been ruled out.

Subjective

- Hello Ms. Smith. My name is Dr. Witt. I am a physician in this hospital. I will take care of you today. What brings you to the hospital today?
- Hello doc, this shoulder of mine, it hurts bad since morning.
- · I see. I would like to know more about it.
- · Sure Doc.

Contd...

- · So how did this start?
- Well I woke up this morning doc, and I was trying to lift something off the kitchen counter. My right shoulder felt stiff. I couldn't raise my arm. Then I felt sharp pain in my shoulder. I thought I had broken something so I came in.
- I see. You did the right thing by coming in.

- Thanks doc.
- Did you hear anything snip or crack when this happened?
- Not really.
- How bad is the pain?
- It's a 3 or 4.
- Does it move anywhere?
- · No its just my shoulder.

- · How would you describe the pain?
- Its an ache.
- Does anything make it worse?
- · Moving my arm does.
- · Does anything seem to help?
- Staying in this position (mid prone) helps. I took a Tylenol, it didn't do much.
- Okay. Were you completely alright before this?
- My shoulder has been kinda stiff doc. For about a month now.

- I see. Does your other shoulder too feel stiff?
- Not as much, but sometimes it does.
- I see. Do any other joints in your body feel stiff?
- · No doc.
- Does any other part of your body hurt?
- · No.

- · Do you have a fever?
- · No doc.
- · Have you lost any weight recently?
- None.
- · Can you sleep on your right side?
- · Yes doc.
- Does your head hurt / temples hurt ?
- · No doc.

PAM HUGS FOSS

- Okay Ms. Smith, now lets go over your medical history, medication list and habits.
- Sure.
- Do you have any medical problems?
- · None.
- Do you take any medications including vitamins, over the counter, herbals?
- · No.

Contd...

- Are you allergic to any medication or substance?
- None that I know of.
- · Have you been hospitalized in the past?
- · No.
- Any surgeries in the past?
- · No.
- Have you hurt your right shoulder or sprained it in the past?
- No doc.

- · Okay, now lets talk about your habits.
- · Do you smoke?
- · No.
- · Do you drink alcohol?
- Only in parties, just socially.
- · Do you use any recreational drugs?
- · No.
- · What kind of work do you do?
- I am a stay at home mom.

- Okay. Are you aware of any medical problems in your family?
- My father had a stroke 2 yrs ago. Mother is an asthmatic. One of my brothers is diabetic. Other than that I am not sure.
- Okay great. How have you been moving your bowels?
- They are alright.

- · How about your bladder?
- No problems with that too.
- · Any trouble sleeping?
- No doc.
- · Are you still menstruating?
- Yes doc. Its regular, my period is about 3 to 4 days.
- Okay. Do you have kids and how many?
- I have 2 kids, one is 14 and the other will be 19 next week.

- · Are you sexually active?
- Only with my husband. We use protection as I don't like pills.
- Great. Thanks for all the information. Now let me wash my hands and examine you.

Physical Examination

- Wash your hands.
- Drape the patient.
- Do a good general and HEENT examination.
- Examine shoulder first.
- Auscultation of CV and RS.
- Explains, offers and performs OMM if indicated.

Osteopathic Musculoskeletal Examination

- Inspection: Any skin changes, swelling.
- Range of Motions: Active range of motions of bilateral involved joint and passive range of motions if limitation to active range of motion detected.
- Palpation:
 - i. Any tenderness, tissue texture changes.
 - ii. Chapman points, viscerosomatic reflexes.
 - iii. Somatic dysfunction.

Closure: Assessment and Plan discussion

- Thank you for your cooperation, Ms. Smith. Now lets go over my impressions.
- Sure doc.
- There are some possibilities that I am considering at this time.
- May be there was an injury to your shoulder, without you realizing it. We first need to make sure you haven't broken anything.

Contd...

- Sure doc. I would also like to find out.
- It could be that your arm just slipped out of your shoulder socket. That is impairing your movements and hurting you.
- Or it could be you ruptured one of the tendons, on top of your shoulder. Its called the rotator cuff.
- Or may be some other ligament or structure that ruptured.

- Sure doc. What else could it be?
- There could also be what we call bursitis. There are small pockets with fluid, between the shoulder and muscles. They keep things gliding smoothly. If one of them is swollen, it can become painful. May be you have that.
- I see doc. What else do you think?

- Well after making sure it is not that, I would consider a medical cause like Rheumatoid arthritis.
- Although its rare for RA to affect just the shoulder and not other joints. But I would like to keep that at the back of my mind.
- Sure doc. So how would you find out which one of these it is?

- I would like you to go for an X-ray of the shoulder. Only if I don't see anything abnormal there, then I would consider medical causes.
- Sure doc, I understand.
- Till then, I will give you something for your pain. I would also advise you not to lift heavy objects.

- Sure doc. Can I get an ace wrap or something?
- Yes we can provide you supportive bandage till then. So your shoulder will be supported and there is no unnecessary movement.
- When will you get these results?
- It wont be long. We can get the X-ray read very soon, may be within half an hour or so.

- · Great doc. I would like that.
- Sure. I would pull it up myself and see it. And I would also ask the radiologist for their opinion.
- Sure doc.
- Once I see it, I will be able to say what it could be. Then we can make a plan for treatment. Does that sound right?
- · Yes it does.

- Good. Is there any other question or concern that I can answer for you at this time?
- No doc, I am all set.
- Very good, Ms. Smith. I would send you for the tests now. I would like to see you after 5 days to see how you are doing. Take care.
- Thank you doc.

Assessment and Plan:

- Assessment:
- 1. Bursitis
- 2. Rotator cuff tear
- 3. Shoulder dislocation
- 4. Frozen shoulder
- 5. Painful arc syndrome
- · Plan:
- 1. Ibuprofen 600 mg three times a day for 5 days.
- 2. OMM- Spencer technique performed.
- 3. CBC with differential, BMP, EKG, X-ray Rt. Shoulder AP and Lateral views.
- 4. Advised for ROM exercise.
- 5. Follow up after 5 days.

