CLINICAL CASES
Case: Mr. AP
Case: Mr. AP

- 37-year-old male
- Pain in the superior aspect of the right shoulder
- Collided with another player on the football field 2 days ago
- Continued to play following this trauma
Mr. AP: Discussion Question

WHAT DO YOU EXPECT TO FIND UPON EXAMINING THE SHOULDER AND NECK?
Mr. AP: Shoulder and Neck Examination

- Inspection: slight anterosuperior swelling
- Cervical spine: normal
- Range of motion: normal (external rotation, abduction, internal rotation)
- Rotator cuff tests: normal
- Acromioclavicular joint:
  - Palpation: painful
  - Scarf test: positive
Mr. AP: Discussion Question

WHAT IS YOUR DIAGNOSIS?
Mr. AP: Diagnosis

- You diagnosis Mr. AP with acromioclavicular joint sprain
WHAT IS YOUR RECOMMENDED TREATMENT PLAN?
Mr. AP: Treatment Plan

- Acetaminophen or other short-term coxib/nsNSAID administered regularly are recommended for relief of mild to moderate acute musculoskeletal pain
- Sling for comfort
- Taping by physiotherapist
- Physiotherapy or therapeutic exercise
- Return to playing football in 1-4 weeks, according to pain

Coxib = COX-2-specific inhibitor; nsNSAID = non-selective non-steroidal anti-inflammatory drug;
Case: Mr. MSK
Case: Mr. MSK

- 26-year-old male
- Medial knee pain
- Twisted his knee while rollerblading 4 days ago
- Swollen knee next day
WHAT ELSE WOULD YOU LIKE TO KNOW?
Mr. MSK: Additional Information

- Pain is triggered rollerblading
  - First time in several months he has been rollerblading
  - Remembers twisting at one point with pain
  - Continued rollerblading as did not want to lose face in front of his friends
- Was on crutches last year due to a football injury in the same knee
- Awoke with increased pain and swelling next day
- No old surgery or deformity
Mr. MSK: Discussion Question

WHAT PHYSICAL EXAMINATION WOULD YOU DO?
Mr. MSK: Physical Examination

- Slight limp
- No excess weight
- No genu varum or valgum
- Knee swollen?
- Locates pain medially with finger
- Difficult to crouch
- Hip: clear

- Swelling:
  - Fluid wave test: positive
  - Patellar tap: negative
- Palpation: pain medial joint line, particularly posterior
- Range of motion: limited flexion with pain ++ (but knee swollen)
Mr. MSK: Specific Maneuvers

- Medial and lateral collateral ligaments: no laxity
- Meniscus: positive (McMurray, Thessaly)
- Anterior collateral ligament: negative (anterior drawer, Lachman)
- Posterior collateral ligament: negative (posterior drawer)
- Patella: no apprehension or pain
- Iliotibial band: not evaluated

WOULD YOU CONDUCT ANY FURTHER INVESTIGATIONS? IF SO, WHAT?
Mr. MSK: Imaging

- Given Mr. MSK’s limited range of motion, you decide to X-ray the knee
- Findings suggest small meniscal tear
Mr. MSK: Discussion Question

WHAT IS YOUR DIAGNOSIS?
Mr. MSK: Diagnosis

- You diagnosis Mr. MSK with internal meniscal lesion
Mr. MSK: Discussion Question

WHAT IS YOUR RECOMMENDED TREATMENT PLAN?
Mr. MSK: Treatment Plan

- Coxib/nsNSAID
- Physiotherapy or therapeutic exercise
- Consider referral to orthopedist if knee is locking or giving way or if there are mechanical symptoms

Coxib = COX-2-specific inhibitor; nsNSAID = non-selective non-steroidal anti-inflammatory drug;
Case: Mrs. PO
Case: Mrs. PO

- 33-year-old woman
- Single mother of 4-year-old and 2-year-old
- Scheduled for hysterectomy following diagnosis of uterine myomatosis
WHAT FURTHER INFORMATION WOULD YOU LIKE?
WOULD YOU PROVIDE MRS. PO WITH EDUCATION OR ADVICE PRIOR TO SURGERY?
Mrs. PO: Medical History

- Occasionally suffers from migraines, which she describes as debilitating
  - Takes over-the-counter ibuprofen for these headaches, which she says sometimes helps
- No previous surgery
- No current medications except over-the-counter-multivitamin
Mrs. PO: Pre-operative Consultation

- You discuss Mrs. PO’s expectations regarding pain and pain relief following the hysterectomy
- Mrs. PO indicates that maintaining functionality and caring for her active young sons are a priority
- You provide her with several informative pamphlets
Discussion Question

WHAT ARE THE CONSIDERATIONS WITH REGARDS TO MRS. PO’S POSTSURGICAL PAIN MANAGEMENT?
WHAT WOULD BE YOUR TREATMENT PLAN?
Mrs. PO: Treatment Plan

• Immediately following surgery: strong opioid + nsNSAID/coxib
• Step-down to: nsNSAID/coxib + acetaminophen + weak opioid
• Then: nsNSAID/coxib + acetaminophen

Coxib = COX-2-specific inhibitor; nsNSAID = non-selective non-steroidal anti-inflammatory drug;
Case Template
Patient Profile

• Gender: male/female
• Age: # years
• Occupation: Enter occupation
• Current symptoms: Describe current symptoms
# Medical History

## Comorbidities
- List comorbidities

## Measurements
- BMI: # kg/m²
- BP: #/# mmHg
- List other notable results of physical examination and laboratory tests

## Social and Work History
- Describe any relevant social and/or work history

## Current medications
- List current medications
Discussion Questions

Based on the case presentation, what would you consider in your differential diagnosis?

What further history would you like to know?

What tests or examinations would you conduct?
Pain History

• Duration: *When did pain begin?*
• Frequency: *How frequent is pain?*
• Quality: *List descriptors of pain*
• Intensity: *Using VAS or other tool*
• Distribution and location of pain: *Where does it hurt?*
• Extent of interference with daily activities: *How does pain affect function?*
Clinical Examination

- List results of clinical examination
Results of Further Tests and Examinations

- List test results, if applicable
WHAT WOULD BE YOUR DIAGNOSIS FOR THIS PATIENT?
Diagnosis

• Describe diagnosis
Discussion Question

WHAT TREATMENT STRATEGY WOULD YOU RECOMMEND?
Treatment Plan

• List both pharmacologic and non-pharmacologic components of management strategy
Follow-up and Response to Treatment(s)

- *Describe pain, function, adverse effects, etc. at next visit*
WOULD YOU MAKE ANY CHANGES TO THERAPY OR CONDUCT FURTHER INVESTIGATIONS?
Other Investigations

• List results of further investigations, if applicable
Changes to Treatment

• Outline changes to therapy, if applicable
Conclusion

- Describe pain, function, adverse effects, etc. at next visit
What If Scenarios

• How would your diagnosis/treatment strategy change if...
  – List what if scenarios