Return Shoulder Patient Form

UW Medicine

Bone and Joint Center – Shoulder and Elbow Team
4245 Roosevelt Way NE Seattle, WA 98105-6920 Campus Box 354740

Affix Pt Label Here

Name:
U Number:
DOB:
DOS:

Name _____ Date _____ Age _____

Please Check one: ☐Right Handed ☐Left Handed ☐Ambidextrous

How did you hear about us? _____

Requesting Physician

Name _____ **UPIN #** _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____ email _____

Primary Care Physician

Name _____ **UPIN #** _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____ email _____

If a **work related problem** please list your OWCP Claim# _____ or L&I Claim# _____

What brings you in today? _____

1. Where is the problem located? ☐Right ☐Left ☐Both / ☐Shoulder ☐Elbow (please be specific)

2. If you have pain, please check the description(s) that are most appropriate:

Sharp Throbbing Aching Burning Stabbing Heavy Dull

3. Please rate the intensity of your joint Pain/discomfort: (1 = No Pain, 10 = Severe Pain)

1 2 3 4 5 6 7 8 9 10

4. Is your pain getting: ☐Better gradually ☐Better rapidly ☐Worse ☐Worse gradually ☐Worse rapidly

5. What improves your symptom(s)? _____

6. What makes your symptom(s) worse? _____

Please list Pain Medications used	**Dose**	**Times per day**	**Reason for taking**

1. Are you having any: ☐**Fevers** ☐**Chills** ☐**Nausea** ☐**Vomiting**
2. Do you have any Heart conditions: ☐YES ☐NO Specify:_____
3. Do you have Diabetes: ☐YES ☐NO
4. Do you have any Breathing Problems: ☐YES ☐NO Specify_____
5. Do you smoke or use tobacco? ☐YES ☐NO How many packs/cans per week? _____

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Simple Shoulder Test

Dominant Hand (*fill in only one circles*): Right ○ Left ○ Ambidextrous ○

Please answer YES or NO for both of your shoulders

		RIGHT		LEFT		
		YES	NO	YES	NO	
1	Is your shoulder comfortable with your arm at rest by your side?	○	○	○	○	1
2	Does your shoulder allow you to sleep comfortably?	○	○	○	○	2
3	Can you reach the small of your back to tuck in your shirt with your hand?	○	○	○	○	3
4	Can you place your hand behind your head with the elbow straight out to the side?	○	○	○	○	4
5	Can you place a coin on a shelf at the level of your shoulder without bending your elbow?	○	○	○	○	5
6	Can you lift one pound (a full pint container) to the level of your shoulder without bending your elbow?	○	○	○	○	6
7	Can you lift eight pounds (a full gallon container) to the level of your shoulder without bending your elbow?	○	○	○	○	7
8	Can you carry twenty pounds at your side with this extremity?	○	○	○	○	8
9	Do you think you can toss a softball under-hand twenty yards with this extremity?	○	○	○	○	9
10	Do you think you can toss a softball over-hand twenty yards with this extremity?	○	○	○	○	10
11	Can you wash the back of your opposite shoulder with this extremity?	○	○	○	○	11
12	Would your shoulder allow you to work full-time at your regular job?	○	○	○	○	12

Office Use Only – For Physician to Fill Out

	DJD	SDJD	RA	FS	PTSS	AVN	CA	CTA	SA	PTCL	RCT	TUBS	AMBRII
R	○	○	○	○	○	○	○	○	○	○	○	○	○
	Other:												
	DJD	SDJD	RA	FS	PTSS	AVN	CA	CTA	SA	PTCL	RCT	TUBS	AMBRII
L	○	○	○	○	○	○	○	○	○	○	○	○	○
	Other:												

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Simple Elbow Test

Dominant Hand (*fill in only one circles*): Right ○ Left ○ Ambidextrous ○

Please answer YES or NO for both of your elbows

		RIGHT		LEFT		
		YES	NO	YES	NO	
1	Is your elbow comfortable with your arm at rest by your side?	○	○	○	○	1
2	Does your elbow allow you to sleep comfortably?	○	○	○	○	2
3	Does your elbow allow you to reach the small of your back to tuck your shirt in?	○	○	○	○	3
4	Can you place your hand behind your head with the elbow straight out to the side?	○	○	○	○	4
5	Will your elbow allow you to pull on socks or stockings?	○	○	○	○	5
6	Does your elbow allow you to lift one pound to the level of your shoulder?	○	○	○	○	6
7	Can you use your arm to help you rise from a chair?	○	○	○	○	7
8	Will your elbow allow you to carry 20 pounds at your side?	○	○	○	○	8
9	Will your elbow allow you to comb your hair?	○	○	○	○	9
10	Will your elbow allow you to throw a ball with this arm?	○	○	○	○	10
11	Will your elbow allow you to wash the back of your opposite shoulder?	○	○	○	○	11
12	Would your elbow allow you to work full-time at your regular job?	○	○	○	○	12

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	Cont	INST	FInR	TeEl	DiBi	LoBo	TraA	RheA	FArh	UlnN
R	○	○	○	○	○	○	○	○	○	○
	Other:									
	Cont	INST	FInR	TeEl	DiBi	LoBo	TraA	RheA	FArh	UlnN
L	○	○	○	○	○	○	○	○	○	○
	Other:									