Shoulder Girdle Trauma - Scapula & Scapulothoracic



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Disclosures

None

Objectives

Relevant anatomy

How to disconnect the arm from the trunk:

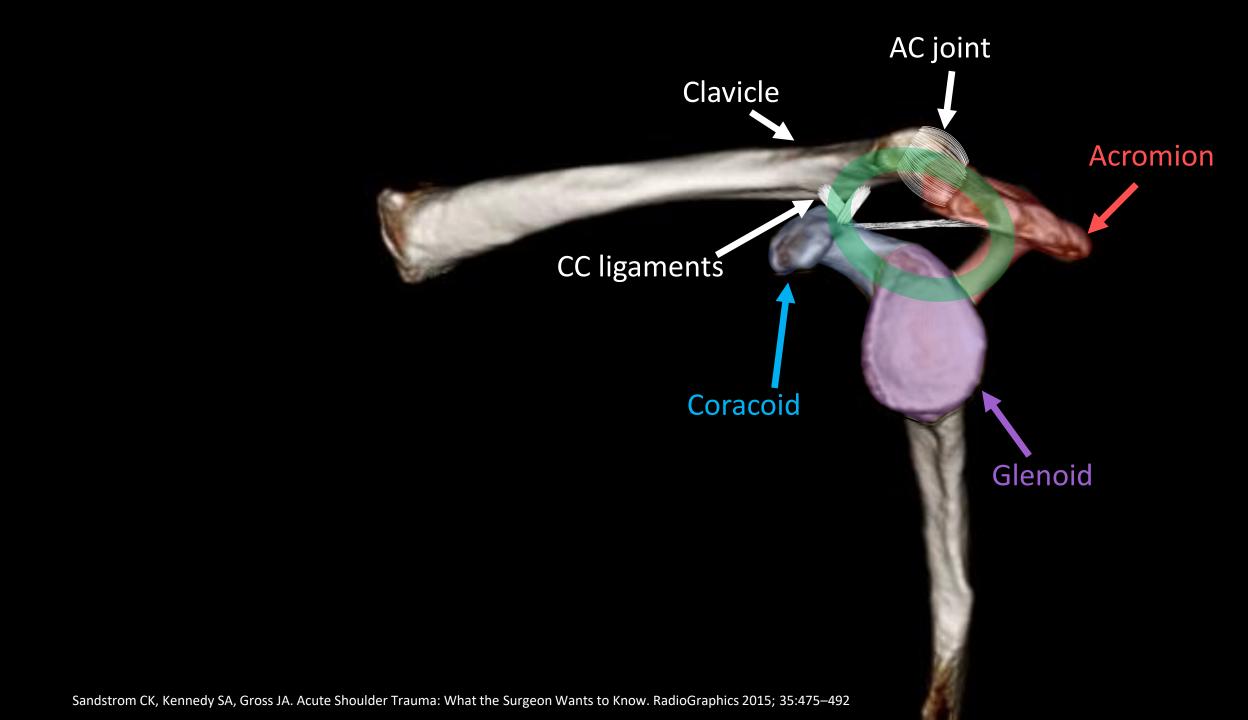
- 1. Scapular fractures and the Superior Shoulder Suspensory Complex (SSSC) and the "floating shoulder"
- 2. Scapulothoracic dissociation

Attaching the arm...

Upper limb is connected to the trunk by 3 joints:



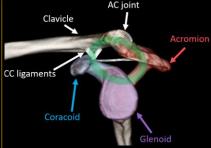
- Glenohumeral joint
- 2. Acromioclavicular joint
- 3. Scapulothoracic "joint"



Superior Shoulder Suspensory AC joint Complex (SSSC) Clavicle Acromion CC ligaments SSSC: it's an injury Coracoid Glenoid checklist for scapula!! Sandstrom CK, Kennedy SA, Gross JA. Acute Shoulder Trauma: What the Surgeon Wants to Know. RadioGraphics 2015; 35:475–492

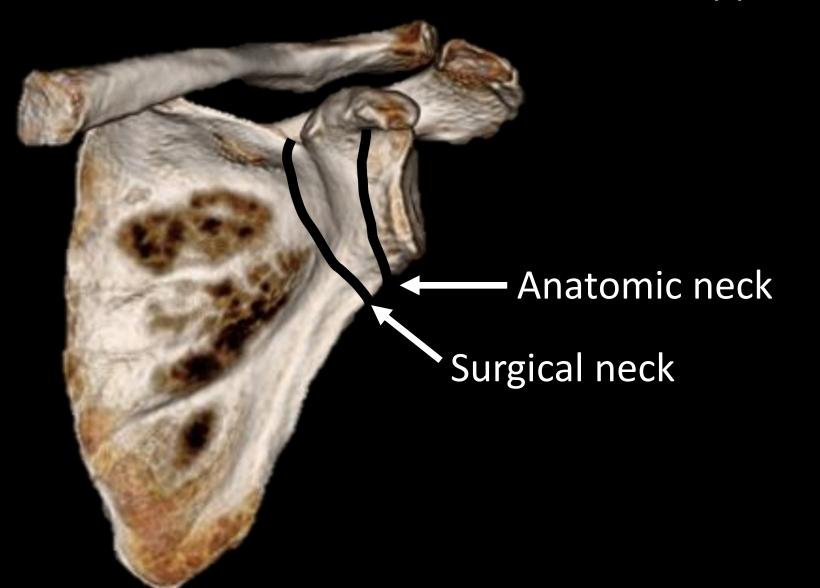


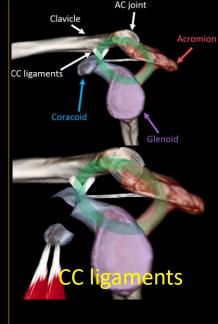
Coracoid fracture: watch the coracoclavicular (CC) ligaments! Coracoid frx proximal to CC ligs? Coracoid tip frx distal to CC ligs? CC ligament avulsion? This tip fracture is distal to the coracoclavicular ligaments. It doesn't involve the ring at all!



CC ligaments

2 Glenoid neck fractures: 2 main types





Glenoid "neck"

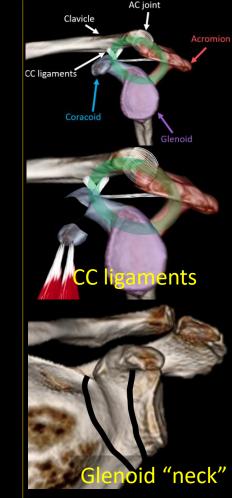
3 Scapular body fractures

Isolated scapular body fxs don't involve the SSSC at all



Coracoid
Acromion
Glenoid
Scapular spine*

https://surgeryreference.aofoundation.org/orthopedic-trauma/adult-trauma/scapula/body-and-processes-body



- -Transverse coracoid fracture involving the CC ligament insertion
- -Distracted coracoid tip avulsion
- -AC separation

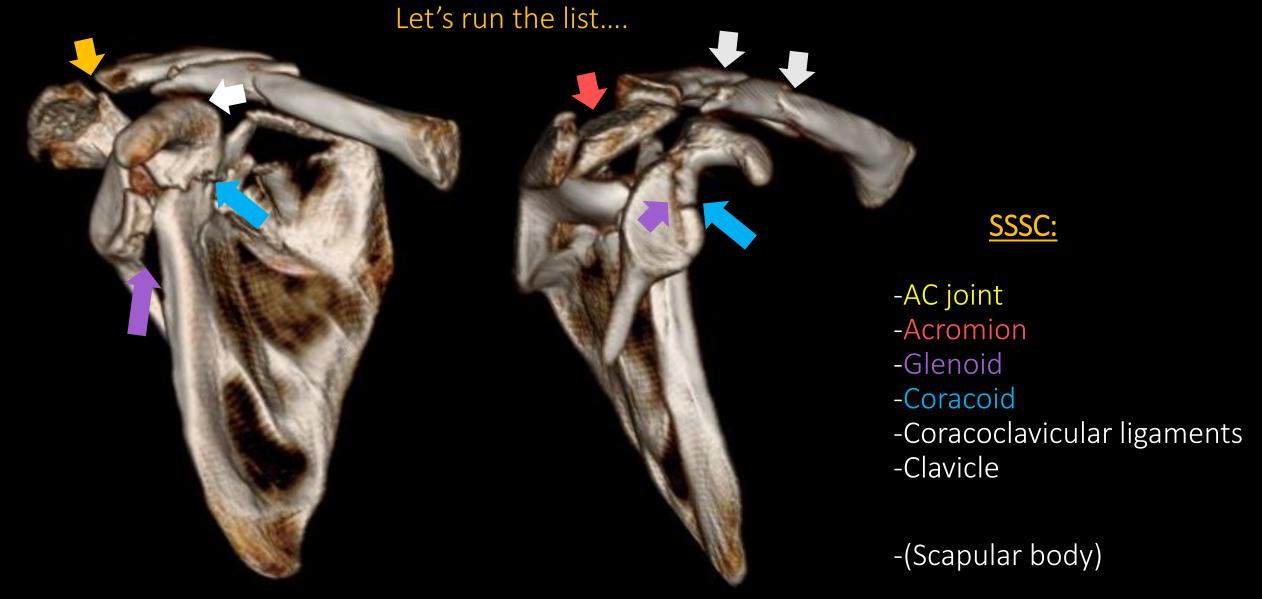


And remember...a good number will look just like this....



Does this scare you?

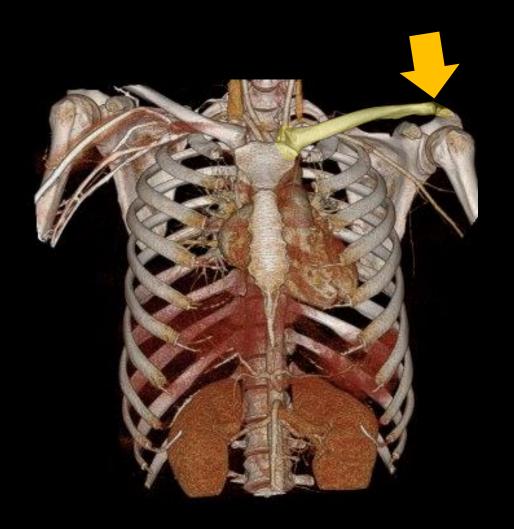
We've got a very specific list of items we want to know about now. Don't try to take all this in at once.



Scapulothoracic Dissociation: remember those "joints"?

AC joint (or SC or clavicle)

Scapulothoracic "joint"





Diagnostic criteria

- AC separation, widely distracted clavicle fracture or sternoclavicular separation

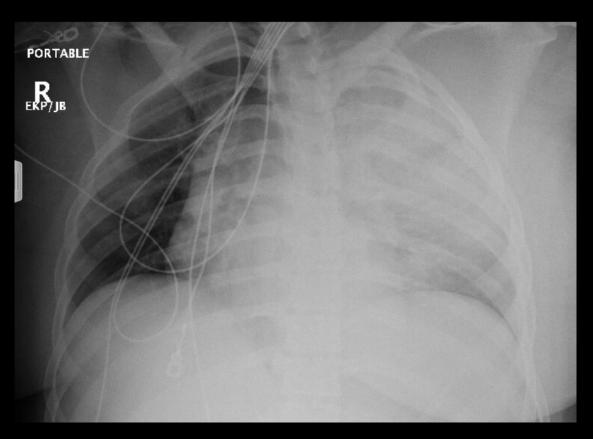
 RED FLAG
- Lateral displacement of the scapula on the affected side**

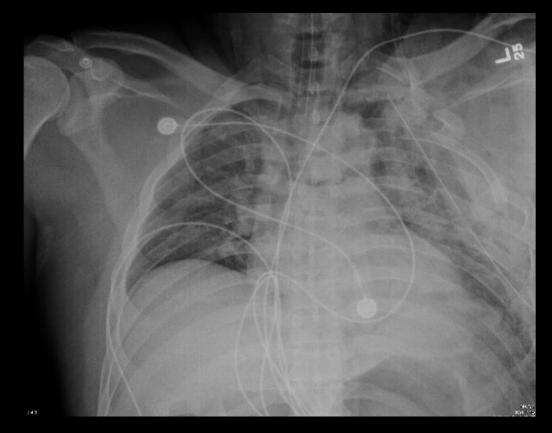


Diagnostic criteria

- AC separation, widely distracted clavicle fracture or sternoclavicular separation

 RED FLAG
- Lateral displacement of the scapula on the affected side**





Choo AM, Schottel PC, Burgess AR. Scapulothoracic Dissociation: Evaluation and Management. J Am Acad Orthop Surg 2017; 25: 339-347

Diagnostic criteria

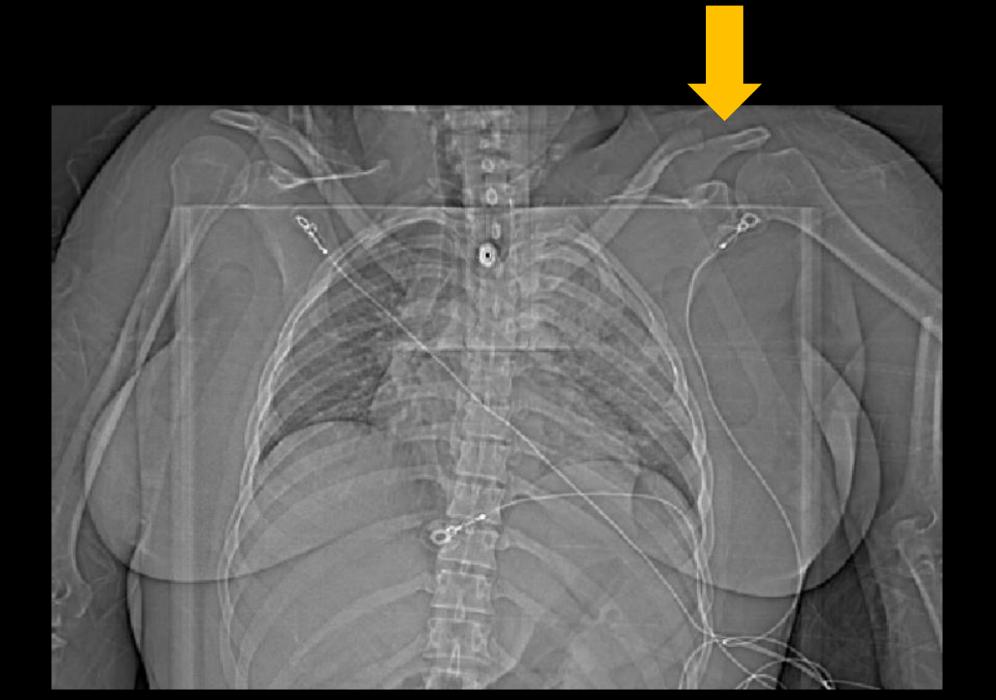
- AC separation, widely distracted clavicle fracture or sternoclavicular separation

 RED FLAG
- Lateral displacement of the scapula on the affected side**
- Large axillary hematoma

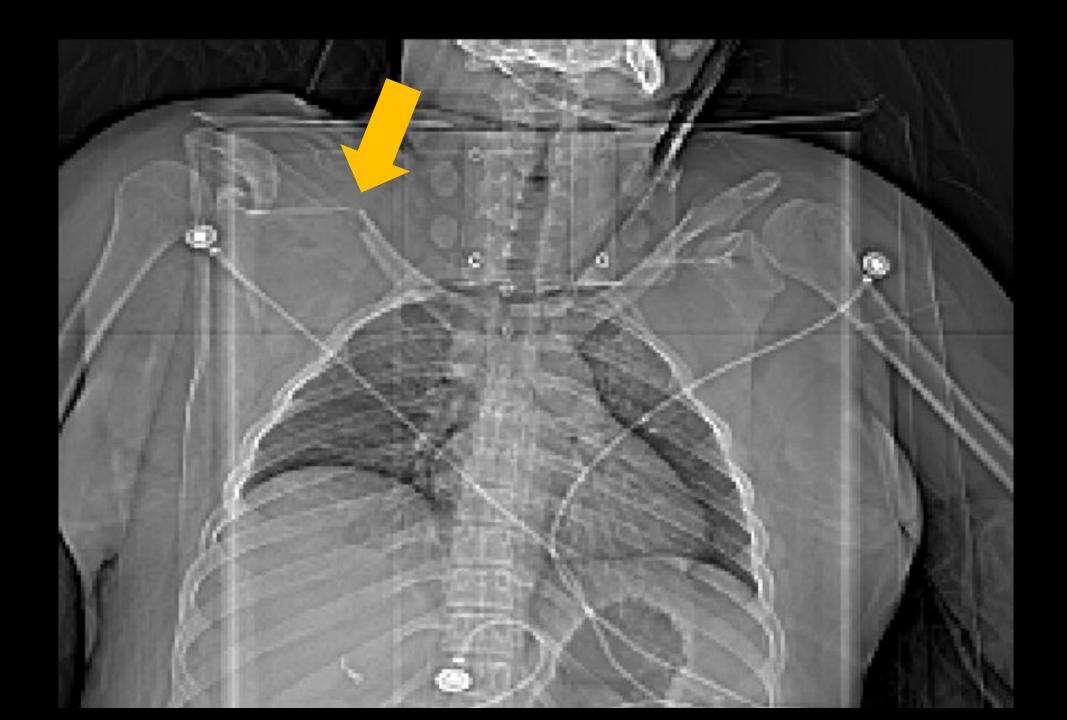
 RED FLAG

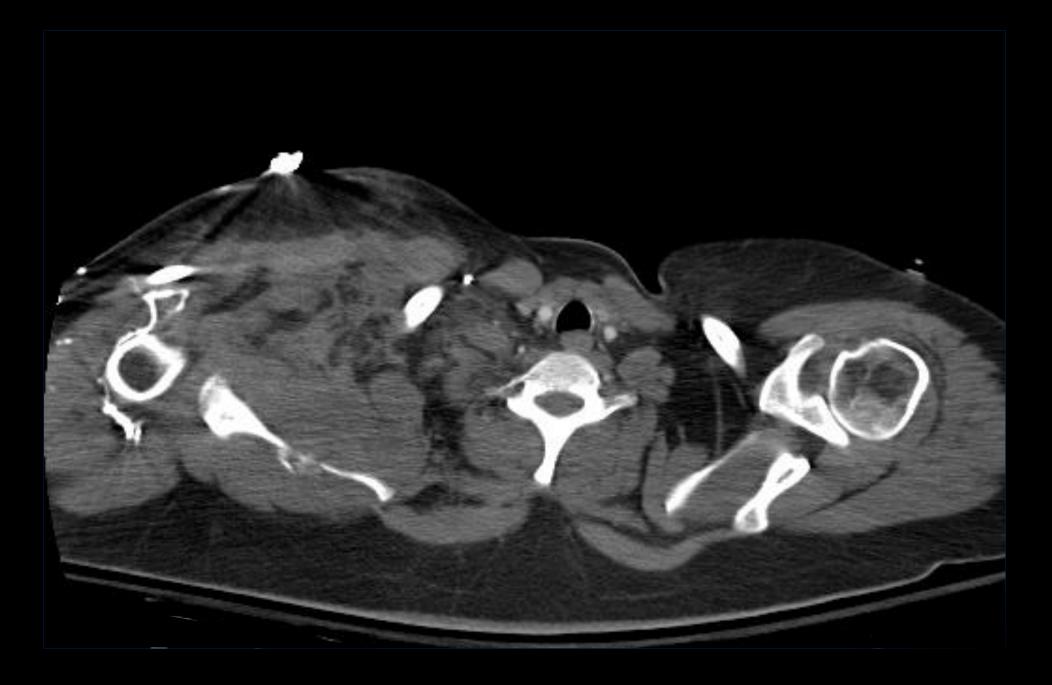
Immediately go looking for:

- Vascular injuries (axillary artery and vein, subclavian)
- Evaluate for neurologic injury (clinical in the acute setting)



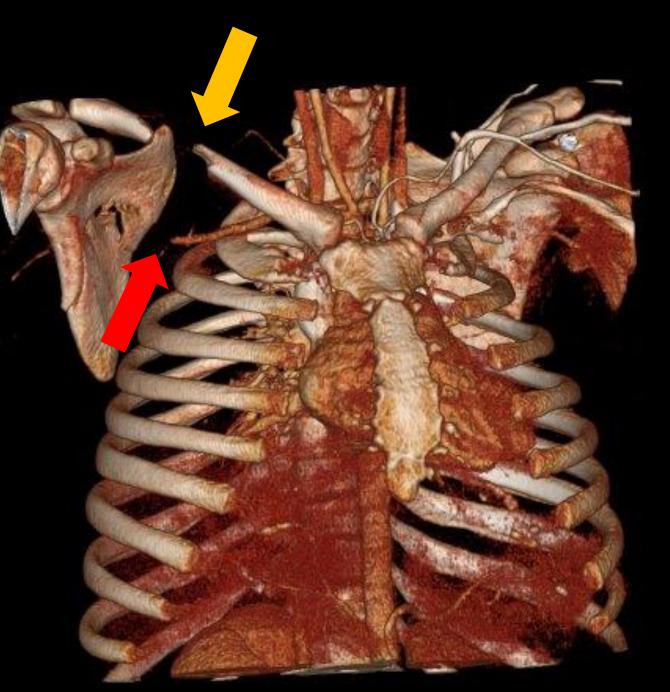






Case courtesy of Dr. Ramesh Chinapuvvula

If you recognize this injury you won't miss the findings associated with it



AC joint Acromion

Coracoid

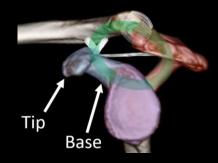
Clavicle

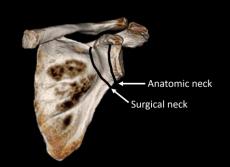
Glenoid (+ neck)

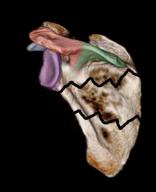
Coracoclavicular ligaments

Coracoid: Watch the CC ligaments Which glenoid neck was that again?

Scapular body fxs don't involve SSSC at all!

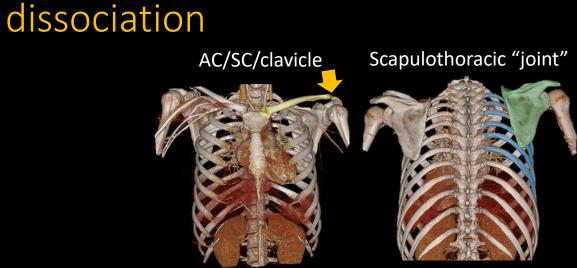






Scapulothoracic

Must involve:





AC/SC/clavicle on initial CXR. Lateral displacement of the scapula**



Axillary hematoma



Look for:

Vascular injury Neurologic compromise

Thank you!



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