



Making decisions with my healthcare professional: Shoulder problems for people aged 16 and over

Primary care and self care

Use this tool to prepare for appointments, during appointments, or both.

Sharing information about my condition

Name:

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I think that my shoulder problems are due to: (Please write below)

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.....

Today, I hope that we can:

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.....

I would like some help with: (please circle what matters most to you)

Activity	Family and friends	Mobility	Pain	Sleep	Mental wellbeing	Work and finance	Fatigue

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What is likely to happen with my shoulder problems?

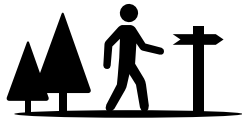
Shoulder pain varies a lot among people. Most people can manage their shoulder problems with simple treatments. These include exercise or medication.

About 6 out of every 10 people recover from their shoulder pain in less than 6 months. Shoulder problems take longer to get better for about 4 out of every 10 people. These people may need more treatments.

Understanding my options

Can we please talk about my options?

What can I do myself?



Being active



How I feel



Healthy weight



Community groups

What adjustments might help me?



House and home



At work



Getting around



Managing with money

What types of tests and treatments might help?



Physical therapies



Mental health



Medicines and other treatments



Tests and scans

General Questions:

What are the advantages and disadvantages of these options?

How much better will I feel, and when?

What practical things should I know?

Should I choose one option or try several?

Notes

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What should I do?

People who stay active or go to work with shoulder problems recover faster and have less pain than people who rest.

Understanding my treatment options

What does the evidence say about shoulder pain?

After a healthcare professional has diagnosed your shoulder problems, you can discuss these options with them to find out if they are right for you. If you have exhausted the choices listed here and want to discuss further options, please ask for *Shoulder pain: thinking about a referral*.

Exercise and physical activity

Most people who have shoulder pain will get some help from an exercise programme. Early on, a home-based strengthening programme may be just as helpful as a supervised exercise programme. At first, exercise may make pain worse, but this does not mean that the shoulder is being damaged. It's best to start with a small amount of activity and build up.

Paracetamol

Some people with shoulder pain will get some help from paracetamol. It is less likely to cause side effects than other medicines, so it may be good to try it first. Many people find that paracetamol works better if they take it regularly instead of waiting for pain to get bad.

Non-steroidal anti-inflammatory (NSAID) tablets, such as ibuprofen or naproxen

Most people with shoulder pain will have less pain in the first 3 months of taking NSAID tablets. These should be taken at the lowest dose that works for the shortest possible time, and usually with tablets to protect the stomach. People with some health conditions should avoid NSAID tablets. NSAIDs work better if you take them regularly instead of waiting for pain to get bad.

Steroid injections

Steroid injections help most people with shoulder pain that is very bad. People will get the most relief in the first 2 months after they get the injection. There is a small risk of complications such as pain, infection, bleeding or bruising.

Opioids

People should only use weak opioids such as codeine if they cannot take NSAIDs, if NSAIDs have not worked well enough or have caused side effects. People should only use opioids for short periods, as opioids can cause side effects and addiction. Guidelines recommend avoiding strong opioids, including tramadol, morphine and oxycodone.

Tests and scans

Usually a healthcare professional can diagnose someone from their symptoms and by examining them, so most people do not need tests or scans.

Some people's shoulder problems may be caused by conditions that need other kinds of treatment. Your healthcare professional will explain options recommended by the National Institute of Health and Care Excellence, or NICE. This will help you make a decision together about what is best for you.

Sharing decisions

Please complete this section together with your healthcare professional.

- I would like to make some decisions today
- I would like to talk to my family and/or friends before making a decision
- I would like to make another appointment
- I would like to have more information

We agreed that:



I will:

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My healthcare professional will:

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I should come back to see a healthcare professional if:



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If I have a problem or a concern, I should contact: (name and contact details)

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I can find more information:

1. [nhs.uk/conditions/shoulder-pain/](https://www.nhs.uk/conditions/shoulder-pain/)
2. [versusarthritis.org/shoulder-pain](https://www.versusarthritis.org/shoulder-pain) or call our helpline on 0800 5200 520
3. [nice.org.uk/guidance/cg177/ifp/chapter/About-this-information](https://www.nice.org.uk/guidance/cg177/ifp/chapter/About-this-information)
4. [citizensadvice.org.uk](https://www.citizensadvice.org.uk) or 03444 111 444
5. [fitforwork.org](https://www.fitforwork.org)

Local services I can access include:

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This decision support tool was developed by Versus Arthritis with support from the Primary Care Centre Versus Arthritis at Keele University and funding from NHS England. For information on the evidence sources used, please contact content@versusarthritis.org